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ABSTRACT

Intended for teachers and administrators in special education, the curriculum guide offers information on planning a health education program for emotionally disturbed or learning disabled children at the secondary level. Sections preceding the actual guide include information on specific goals of and elements necessary for a successful health education program, the philosophy and implimentation of a school health program, and a curriculum overview. Units are presented in outline form for the following topics: nutrition; sensory perception; dental health; health status and disease prevention and cure; drugs; tobacco; alcohol; mental health; family life; consumer, environmental, and public health; and safety and first aid. Each topical unit consists of five basic parts--overview and objectives (a brief orientation to the philosophy regarding the unit), concepts (necessary background material for behavioral change), content outline, learning and evaluative activities, and resources (including books, films, pamphlets, and games). (SB)

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HEALTH EDUCATION FOR SPECIAL CHILDREN

Curriculum Development Committee

U S DEPARTMENT OF HEALTH EDUCATION & WELFARE NATIONAL INSTITUTE OF EDUCATION

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Dear Special Educators,

A comprehensive health curriculum is a must in the education of exceptional children. Excepting the three "R's", health is probably the most functional of the skills we can attempt to teach special children. Through coordinated efforts, from the primary level to the high school level, proper habits and attitudes can be developed.

When this curriculum guide is implemented, with the vigor characteristic of the Special Educators in our county, there is no doubt that this guide will help provide improved health education in our county and serve as a source of continuous and sequential health education planning. The teachers, however, who employ the guide in their everyday instruction will give the curriculum its ultimate test.

We appreciate the cooperation and coordination that has taken place to make the health curriculum a vital part of the Special Education program in Cortland County. The format in which the curriculum is presented is most useful and provides many ideas to teach content.

It is only through evaluation by those in the field that enables any curriculum to be fully and successfully implemented. Please feel free to contact us if you have any concerns, questions, or suggestions for improvement of the "Health Education for Special Children." This curriculum is a good beginning, but only a beginning to be refined as dictated by the experience of the teachers who utilize it.

Sincerely yours,

George E. Freebern

George E. Freebern, Director
Special Education

Table of Contents

Title Page.....i
Curriculum Development Committee.....ii
Superintendent's Message.....iii
Table of Contents.....iv
Forward.....v
Introduction.....vi
Statement of Philosophy.....vii
Implementation.....viii
Curriculum Overview.....ix
Content Overview.....xi

Nutrition.....1
Sensory Perception.....10
Dental Health.....16
Health Status and Disease Prevention and Cure.....26
Drugs.....39
Tobacco.....47
Alcohol.....58
Mental Health.....65
Family Life.....86
Consumer, Environmental and Public Health.....101
Safety and First Aid.....117

Forward

Health Education For Special Children is the culmination of workshops funded by the Division of Drug and Health Education and Services, State Education Department, and sponsored by the Cortland-Madison BOCES. It reflects the concerted efforts of many persons. The knowledge and expertise of the individual curriculum developers/writers are most worthy of recognition.

This health curriculum guide for special education students is an outgrowth of the health education guides which were developed during the summer of 1974 for use in regular public school classes within this BOCES district.

The eventual mainstreaming of some handicapped children helped to govern much of the material included. Therefore, the activities in each unit were varied enough to provide for individual differences among pupils. The result has been that the content of the units written specifically for emotionally disturbed or learning disabled children, and educable mentally handicapped children was able to follow quite closely the content of the original guides. References should be made to the original guides, therefore, for additional related activities.

To the writing team's knowledge, this is the first comprehensive curriculum created with the special child in mind. It will provide the teacher with many ideas and resources. However, there is always room for modification and suggestions for improvement, any are welcomed.

Introduction

The specific goals of a health education program can be as many and varied as life itself. However, optimal health is dependent upon the interactions of knowledge, attitudes and behavior. The health education program should establish an approach to concepts, generalizations, understandings, facts, values and applications, basic skills, and decision-making processes which can serve as keys to good physical, mental, social, emotional, and spiritual well-being. All participants in the school health education program, including teachers and administrators as well as students, should be assisted in working towards:

1. Acquiring an understanding of his own physical, mental and social health.
2. Developing responsibility toward his own and community health.
3. Acquiring an understanding that the goals of good health result from individual practices and maintenance of those mental, physical, and social habits selected as desirable and good by society and the individual.
4. Acquiring an appreciation of the value of a healthful life.
5. Encouraging systematic development of individual human potential for health, growth and happiness.

These are certain elements necessary for success of a health education program that cannot be written into a curriculum guide. These essential elements come from within the individuals responsible for implementing and carrying out the program:

1. Commitment on the part of administrators and teaching staff to a belief in the value and potential of health education is most important.
2. In view of the definition of health in terms of its psychological, physiological, sociological aspects, there needs to be, more than in any other curriculum area, a willingness to work together and lend support in setting up and maintaining a good school health education program - one which is prevention-oriented and clearly above and beyond the minimal requirements for drug and health education as delineated in the Rules of the Board of Regents and the Regulations of the Commissioner of Education.
3. It is possible to improve the classroom experiences of health education students through sincere desire by all directly involved to utilize to the greatest advantage appropriate resources (including those of a human nature) and/or other quality teaching aids, materials and devices which are made available.
4. Support for the concept of student participation and involvement in their own learning is a most meaningful part of a sound health education program. Provision should be made for a diversity of learning approaches including extension of learning into multi-community settings.

A Statement on Philosophy of the School Health Program

Health is an integral aspect of every phase of life. Without health man cannot function effectively in his society. Health can, therefore, be considered not only biological, but psychological and sociological well-being as well.

The School Health Program, which includes all functions and services designed to promote the optimum health in each child, is a flexible blueprint aimed at assisting students in developing into independent, responsible adults. It would seem that no one, be it student or adult, can be independent and responsible unless he is equipped with the health necessary to be so; health that is, in part, imparted by knowledge and understanding of the forces which is for this reason that, with the guidance of State legislation and the local Board of Education, the School Health Program endeavors to supplement parental responsibility in this realm. The effective and flexible program must originate with the needs and interests of the individual. From this basis, it should continue to meet the needs of the family, community, nation, and the world...

As a result of imparted knowledge, understandings, and good health habits and attitudes, we would hope to kindle, promote, and help each child achieve a state of physical, social, emotional, intellectual and spiritual well-being that would be conducive to such academic learning as the student was capable of acquiring. In short, we aim at helping the student to "become all he is capable of being." This is based on the assumption that health, not being an end in itself, is a means to an end ---- a happy, fruitful life.

Implementation of a School Health Program

Whatever the organizational plan, the only significant test of its worthwhileness is the effect which it brings to bear on the total educational program or the opportunity which it affords children to learn.

When the School Health Program is being established or adjusted, certain guidelines or basic principles, if adhered to, will help to insure its success. These are as follows.

1. Develop it gradually rather than superimposing it abruptly.
2. Though idealistic in its announced goals, it is realistic in its current performance.
3. It fosters continuous communication between all school staff members.
4. Special facilities are at its disposal.
5. It is interwoven with the instructional program.
6. It brings its services to every student, not just to those in distress.
7. It plays an important role in the school's public relations program.
8. It is constantly engaged in a process of self-examination.
9. It insures a balance in services it offers pupils.

Once the program is ready to be established, there are certain general fundamentals which should be considered in its administration:

1. There should be centralized control to assure efficient and effective functioning of the total program.
2. Adequate budgeting of finances to provide necessary salaries, supplies, and equipment should be carried out.
3. There needs to be proper coordination of various divisions, departments, and areas.
4. Selection of teachers and health specialists should be based on the best qualifications for the particular school and community.
5. Allotment of sufficient time in the school curriculum for the health program to function effectively is a necessity.
6. Definite assignment of duties and responsibilities to teachers, health specialists, and administrative assistants is a must.
7. Organization of a health teaching program should be on a school-wide basis.
8. Consideration of legal provisions, state and local laws, and requirements pertaining to and affecting the School Health Program and pertaining to special children should not be neglected.
9. Provisions should be made for assuring maintenance of the school plant and facilities in a sanitary and hygienic manner.
10. Special measures are necessary to recognize and provide for individual physical, mental, emotional, and social differences of students.
11. Methods and plans for safeguaring the health of teachers, as well as of students, should be an integral part of the plan.
12. There should be constant and thorough evaluation of the total School Health Program.

Curriculum Overview

One area of study which is often lacking for special education students is that of health education.

The overall goal of this curriculum is to assist in developing individuals with the competency to function well in society and the ability to cope with the social, physical, emotional, intellectual, and spiritual dimensions of man. This goal seeks to aid in the discovery of self in relation to others in society and in the world and to implement the concept that decision-making is best where each individual has adequate information and experiences upon which to base his decisions. Decision-making is a cumulative process which results from a growing awareness of self and a growing awareness of the healthful alternatives which the health education process provides.

This guide is a vehicle for preventive education, acknowledging that a primary task of the school is development of positive self-concepts, helping students obtain control over their own lives, and maximizing their health potentialities. It offers a curriculum which helps each individual examine the meaning and value he desires health to have in his life and the life style he envisions necessary to implement his desires and values. It represents curriculum designed to fulfill personal needs and interests based on varied ability levels via being meaningful and relevant to students preparing to live healthful, productive and rewarding lives.

This rationale is based on concepts which provide for increasing levels of information and experiences related to physical, psychological, and social development as grade level increases. There is decreasing breadth, but greater concentration of information and experiences in various areas of health education and maturity levels increase providing a continuous and cumulative effect rather than a disjointed one.

Health Education should:

1. Represent a major part of a life-long educational process.
2. Exist for benefit of all students.
3. Represent a process that begins informally during pre-kindergarten years and continues throughout adulthood.
4. Involve total school/community efforts.
5. By its basic nature, revolve around developing a meaningful, satisfying and healthy life.

This particular guide represents one level of a planned, unified and comprehensive K-12 health education program for special children designed to:

1. Meet the needs of all students.
2. Be sequential, building on developmental tasks at each level.
3. Be flexible in order to facilitate implementation on a county-wide basis.
4. Include objectives and learning experiences for assisting in the decision-making process.
5. Be easily updated, due to its format, via replacement of pages upon their obsolescence.

Each topical area or unit consists of five basic parts:

1. Overview and Objectives
2. Concepts
3. Content Outline
4. Learning and Evaluative Activities
5. Resources

The unit overview gives a brief orientation to the philosophy regarding the unit. The outline of objectives reflects the cognitive, affective and psychomotor domains. They signify specific ways students should be able to think, feel, and act, after completion of the unit of study.

The concepts and supporting content outlines provide necessary background material for behavioral change. Coordinated with these are suggested resources and learning and evaluative activities from which student experiences may be selected in order to promote desired behavioral changes. These resources are not only for students, but also include materials which are too difficult for students' personal use, but valuable for teachers in the preparation of lesson plans.

Included among the resources are films which are usually listed with a reference to their Cortland-Madison BOCES number. To locate the producer/distributor, the teacher should consult the NIGEM Index of Films, which is available in most BOCES buildings or other film centers. Of course, any film or material must be previewed and carefully integrated with classroom activities in order to be of maximum effectiveness.

The curriculum guide contained herein is specifically designed to be descriptive and adaptable in order to allow for variations in school systems, teachers, classes and special education students. The teacher may not be able to expect students with certain disabilities to be able to spell correctly or write explanations, if at all, but by repetition as required the student should be able to learn eventually to pronounce and understand the important vocabulary words. The interaction of content and process in health education should lead to the development of problem-solving behavior which can be used flexibly and in a variety of situations. The goal, therefore, is to move as much as possible beyond fragmented and memorized information to the level where concepts are developed and internalized. To this end the teacher may want to draw upon activities from one unit to reinforce the objectives of another, or to use these activities as a point of departure in devising new ones.

Content Overview

Teachers need to be very flexible and ready to adapt the learning experiences to individual learning capabilities. Some of the students who may read and write very poorly can be expected to be very curious and verbalize fairly well regarding health topics presented.

Certain special education students, such as the educable mentally retarded and the trainable mentally retarded, may have very little ability to transfer learning. Words may have to be explained repeatedly in terms they can understand. Any audio-visual materials employed must be carefully screened prior to use and discussed after use to make certain the pupils understand the vocabulary and concepts presented. Emphasis should be placed on learning major concepts not facts that students won't be able to retain. The teaching techniques and extent or depth of coverage of material is governed to a considerable degree by the types and degree of handicaps of the children involved.

Remember that the mentally handicapped child or adult is not very different from any other human being. First, this individual is a human being, and only secondly does he have a handicap. His basic needs are as great as anyone else's, but his difficulties in learning, relating and coping may be greater. His behavioral manifestations may be inappropriate and because of this so-called negative behavior, his problems are great.

Teaching anything to those with learning problems requires special skills and understanding. Their needs are often more individually demanding; and it is usually more difficult to communicate with them. In preparing this guide, the writers were especially conscious of the tremendous range of special education students' abilities to learn. There are handicapped individuals who are barely distinguishable from the so-called "normal" members of society. And there are those whose handicaps are so extreme that they may never learn to perform simple tasks of self-care such as eating or dressing. The writers of this guide assume that the special education teachers using it already have an understanding of the similarities and differences of their students compared to those students without learning problems. Therefore, any reference to types and/or classifications of handicaps is generally avoided.

NUTRITION

OVERVIEW

The child of adolescent age is going through a period of rapid physical growth. He needs extra food to meet the demands of this growth. However, the sources of this larger number of daily calories are critical. At this point it is essential that the child make some connections between types of foods and their effect on growth, strength, and freedom from illness.

Adequate rest and physical activity must be related to good nutrition. Exercise requires extra fuel, but obesity results if the intake of food exceeds the number of calories burned in activity.

Bad eating habits, which have been fromed early in life as a result of environmental and parental training, can still be altered by proper education and the desire to become more physically fit.

OBJECTIVES

Suggested Pupil Outcomes:

1. Relate good nutrition, adequate rest and physical activity to his own growth and development.
2. Differentiate among varieties, forms and sources of food.
3. Analyze the relationships between general physical development and the basic principles of adequate food selection.
4. Describe the importance of food in the development and history of man.
5. Relate different eating patterns to circumstances of living.
6. Analyze current trends and events in society which affect nutritional status and behavior.
7. Can plan and understand the preparation of nutritious meals and snacks.
8. Critically evaluates facts, fallacies and beliefs about foods and food facts.
9. Discovers how behavior while eating can influence body processes in both a negative and positive manner.

10. Organize a plan of nutritional behavior for himself and his family which promotes health/growth/development.

11. Broaden the variety of food eaten and enjoyed by himself and others.

12. Cite examples of social and emotional influences on nutritional behavior.

13. Describe various ways in which the nutritional value of foods can he preserved.

14. Relates how temporary and long standing health problems can result from improper food selection and eating patterns.

15. Recognizes the growing problems of obesity at all age levels.

16. Assess physiological, psychological, social and economic factors affecting diet.

17. Analyze some of the consequences of poor food selection and eating patterns.

18. Understand and demonstrate that nutritional problems may affect international relations.

19. Investigate world food problems.

MAJOR CONCEPTS

1. The individual has the primary responsibility for his own good nutrition and that of his family.
2. Food choices need to be distributed wisely among meals and snacks.
3. Optimal growth is dependent on personal health practices and wise decisions.
4. Work efficiency depends upon adequate food intake.
5. Our selection of food depends upon many different factors.
6. Every food has a story.
7. All nutrients needed for growth are available through foods.
8. Some foods do more for us than others.
9. One's daily diet should be planned each day to include foods which produce sufficient amounts of nutrients and calories.
10. One's feelings and emotions affect digestion of food.
11. The foods you eat today have a far-reaching effect on the body physically and emotionally.
12. Every person is responsible for making meal times pleasant and harmonious.
13. Patterns of selecting and eating foods are determined by many factors - cultural, economic, mental, physical and social.
14. The vitality of our bodies may be lowered by the way certain factors affect utilization of food.
15. Certain foods need to be supplemented or processed before use.
16. Modern methods of processing provide for a wider selection of food.
17. Food may contain substances that are harmful to our bodies.
18. All persons throughout life have need for the same nutrients but in varying, but ample, amounts.
19. Many steps are being taken to solve world food problems.
20. Many agencies at both the local and national levels help to protect against unsafe food practices.

CONTENT OUTLINE

I. Functions of Foods in the Body
   A. Building body tissues and muscles
   B. Preventing disease
   C. Building strong teeth and bones
   D. Providing energy and heat
   E. Aiding in elimination

II. Nutrients and Their Functions
   A. Proteins
      1. Build and repair body tissues
      2. Supply heat and energy
   B. Carbohydrates
      1. Supply heat
      2. Provide energy
   C. Fats
      1. Supply heat
      2. Provide energy
   D. Vitamins
      1. Regulate body processes
      2. Maintain health (prevent deficiency diseases)
   E. Minerals
      1. Build and repair body tissues
      2. Regulate body processes
   F. Water
      1. Regulate body processes
      2. Build body tissue

III. Sources of Nutrients
   A. Protein
      1. Milk
      2. Meat group
   B. Carbohydrates
      1. Breads and cereals
      2. Vegetables and fruits
      3. Sweets
   C. Fats
      1. Butter and margarine
      2. Oils
   D. Vitamins and minerals
      1. In all food groups
      2. In varying amounts

IV. Planning for Good Nutrition
   A. Selecting from the Basic Four food groups for simple meal planning
   B. Good snacks versus empty calories

V. Importance of Proper Care and Preparation of Foods (keeping food and water clean and free from harmful "germs")
   A. Processing to prevent spoiling
      1. Canning
      2. Drying
      3. Preserving
      4. Freezing
      5. Refrigeration
   B. National Food Controls/FDA, FTC, Department of Agriculture
      1. Additives
      2. Chemicals/industrial, agricultural, radiological
   C. Improper food-handling
      1. Food poisoning
      2. Other illnesses and diseases

VI. Government Action to Protect from Unsafe Food Practices
   A. Nutritional quality control
      1. Standards for enrichment and fortification
      2. Abuse of advertising
   B. Sanitary quality control
      1. Federal Food and Drug Administration
      2. Stage agencies
      3. Local inspection of eating establishments

VII. Nutrition as a Person's Individual Basic Responsibility
   A. Teenager's eating habits
   B. Recent studies of teenager's nutritional status
   C. Nutritional concerns of teenagers

VIII. The Individual's Responsibility for Making Mealtime Pleasant and Harmonious
   A. Importance of togetherness at family meals
   B. Pleasant conversations and surroundings
   C. Good table manners

IX. Influence of Nutrition on Contemporary Health Problems
   A. Interrelationships between diet and health
   B. Necessity of specific nutrients throughout life
   C. Needs of different age levels in life
      1. Pre-natal
      2. Early and late childhood
      3. Teenage
      4. Adults - childbearing years
      5. Elderly (65 and over)

X. World Nutritional Problems
   A. Economic, social, political
   B. Organizations
      1. WHO, FAO, UNICEF
   C. Diseases
      1. Kwashiorkor, Marasmus, Malnutrition
      2. Others related to nutritional states

LEARNING AND EVALUATIVE ACTIVITIES

1. List and discuss the foods they ate for breakfast this morning.
2. Discuss food intake of people involved in different occupations.
3. Discuss radio and television advertisements and family food likes.
4. List superstitions the pupils or their parents have about foods. Discuss where they think these ideas came from and whether they are based on sound facts. (Fish is a brain food, white eggs are better than brown, etc.)
5. Make a bulletin board display of reasons why we eat (growth, energy, feel better, etc.).
6. Demonstrate setting up a table, serving and clearing off.
7. Discuss whether feelings of happiness or sadness influence digestion.
8. Discuss fear, hate and anger relating to digestion.
9. Discuss effects of a quick or hurried meal.
10. Role-play ways to encourage a relaxed mealtime and ways to create tension during mealtime.
11. Test nutritional understanding by the following: two menus, each including favorite teenage foods - one balanced, one unbalanced. Have students choose which is nutritionally adequate and explain why.
12. Write a list of reasons for overeating, overweight, underweight.
13. Discuss best ways of spending allowance money on food treats. Emphasize best time to eat snacks.
14. Give the students a list of foods to determine which are used for quick energy, long term energy, growth and repair.
15. Peer discussion of food fads.
16. Project a magazine ad and have students evaluate the emotional appeal and mis-advertising concepts.
17. Have students visit a supermarket and evaluate by use of a list the various nutritional values of predetermined foods. Report back to class. (Perhaps breakfast cereals.)
18. Have students "price shop" in a supermarket for a week's supply of food for a family of 5. Report findings to class orally.

19. Analyze TV commericals on foods, relating the approach used and to whom the appeal is made.

20. Reports on nutritional quackery - why it exists and how it might be overcome.

21. Expose a variety of foods to the air at room temperature. Note how long it takes for each kind of food to spoil. Discuss how these foods are "kept" when they are transported and when they are in stores. Identify the signs of food spoilage: odor, change in texture, change in appearance and color, and change in taste.

22. Observe under a microscope the growth of bacteria or mold that appears on spoiled food.

23. Visit the school kitchen to find out how they store foods to conserve nutritional value. (Refrigeration, freezer, cold, dry, etc.)

24. Have students investigate the various careers available in the field of nutrition. If possible, interview people in these fields and report back to the class on requirements for these positions and responsibilities of these careers. Written report.

25. Investigate the role of one of the federal agencies in establishing standards regarding nutritional standards of foods.

26. Field trip to a commerical bakery or invite a foreman or supervisor from said bakery to class for purpose of explaining the use of chemicals in the baking process and why.

RESOURCES

Books:

Food and Nutrition, William H. Sebrell, Jr., and James J. Haggerty; Time-Life Books, 1967. 613.2 S

Introductory Nutrition, Helen Guthrie; 2nd Edition, C.V. Mosby Company, St. Louis, 1971

The Medicine Show, Consumer's Union, Part II (Chapters 13-17), 1963

The Nuts Among the Berries, Ballantine Book Inc., Food Fadisms and Nutritional Quackery

Rating the Diets, Theodore Berland; Publications International, Ltd. 613.2 B

Films:

Balance Your Diet for Health and Appearance, BOCES #831-25, 11 minutes

*Count Down 4-4-3-2..., BOCES #833-115, 30 minutes

Digestion and the Foods We Eat, BOCES #831-259, 9 minutes

Digestion in Our Bodies, BOCES #831-47, 11 minutes

Eat, Drink and Be Wary, BOCES #832-413, 20 minutes

*The Flim-Flam Man, BOCES #833-118, 30 minutes

Food for Life, BOCES #832-198, 21 minutes

Food Platform, BOCES #832-346, 20 minutes

*Getting It All Together, BOCES #833-120, 30 minutes

*The Great Nutrition Turn On..., BOCES #833-122, 30 minutes

How a Hamburger Turns Into You, BOCES #832-119, 19 minutes

I Am Joe's Stomach, BOCES (video cassette), 26 minutes

*Look Inside Yourself, BOCES #833-131, 30 minutes

Films: (Con't.)

Nutritional Quackery, BOCES #832-43, 22 minutes

The Racer That Lost His Edge, BOCES #833-135, 30 minutes

What's Good To Eat, BOCES #832-199, 17 minutes

Kit:

Cereals, A Food for Today, BOCES #123-24

Filmstrips and Cassettes:

Breakfast and the Bright Life, BOCES #392-8

Breakfast Cereals in Today's Lifestyles, BOCES #392-11

Pamphlets:

Cooperative Extension Service
Nutritional Facts About Foods (Free)
Perspectives on Overweight (Free)
When Is Food Safe? (Free)

Metropolitan Life Insurance Company
Four Steps to Weight Control (Free)
The Big Stretch (Free)

National Dairy Council
Blue Cross and Blue Shield
Food and Fitness (Free)

HEN:

Nutrition Materials, BOCES #HN-19

Charts:

Nutrition: Carbohydrates, BOCES #CH-1

Nutrition: Protein, BOCES #CH-2

SENSORY PERCEPTION

Overview

It is, in essence, our senses which keep the body functioning in a state of dynamic homeostasis. The stimuli in our external surroundings are picked up and interpreted in the brain so that we can respond to the sights, sounds, smells and feelings in the immediate environment.

For the learning disabled or emotionally disturbed student between the ages of 14 and 21, the most important aspect of his/her immediate environment is the people with whom he interacts. At this age, there is an emphasis from adults and among the students themselves on sex-appropriate behavior. Gestures and facial expressions have subtle nuances which each individual needs to perceive and respond to in order to achieve full acceptance. This is in addition to the tremendous complexities of language with which he/she is also attempting to cope. All this implies a great awareness of sensory cues and increased responsibility for the sense organs.

It is the responsibility of the individual by the time he has reached the teen-age years to make certain that the senses are functioning on an optimal level. Ignorance of the function of the senses, particularly of the things which can go wrong with them, is very widespread. It would, therefore, seem important to try to correct this lack of knowledge and understanding as much as possible within the classroom.

OBJECTIVES

1. Value the constant dependency on our senses.
2. Utilize all of the functioning senses to perceive one's surroundings.
3. Describe the role of hearing aids and corrective lenses.
4. Develop an insight into the nature of the various sense organs.
5. Show that the sense organs are protective measures against the dangers in our external environment.
6. Analyze common sensual disorders.
7. Maintain one's own senses at the optimal level.
8. Become aware of the medical and para-medical personnel and services available to assist the individual in maintaining healthy senses.

MAJOR CONCEPTS

1. The senses keep us in touch with the world and tell us of our body's needs.
2. There are five main or special senses - seeing, hearing, smelling, touching, and tasting.
3. Some other "deep senses" within the body are the sense of balance, the kinesthetic sense, the senses of hunger and thirst.
4. Sensory nerves carry messages from the five main senses to special centers in the brain.
5. Eyeglasses can help correct near-sightedness, far-sightedness, and astigmatism.
6. Hearing aids can help people with certain kinds of hearing loss to hear better.
7. The body works as a unit. All parts are interrelated.
8. An understanding of the structure and function of the sense organs develops an awareness of their importance to the individual.
9. Ignorance of proper functioning of the senses may be detrimental to the well-being of the individual.
10. Qualified medical and para-medical personnel should be consulted for any sensory problem.

CONTENT OUTLINE

I. The Eye as a Receptor
   A. Brief anatomy and physiology
   B. Visual problems
      1. Refractive errors
         a. Nearsightedness
         b. Farsightedness
         c. Astigmatism
         d. Blindness
      2. Strabismus
      3. Cataracts
      4. Glaucoma
      5. Squint
      6. Amblyopia
      7. Conjunctivitis
   C. Common injuries to the eye
      1. Corneal laceration
      2. Contact with chemicals
      3. Use of explosives
      4. Direct exposure to the sun and lights
   D. Medical and para-medical specialists
      1. Ophthalmologist: oculist
      2. Optician
      3. Optometrist

II. The Ear as a Collector and Conductor of Sound
   A. Brief anatomy and physiology
   B. Auditory problems
      1. Ear infections
      2. Sound conduction problems
      3. Deafness
      4. Motion sickness
      5. Vertigo
   C. Causes of injuries to the ear
      1. Noise
      2. Blows
      3. Sharp objects
   D. Medical and para-medical personnel
      1. Otologist
      2. Otolaryngologist
      3. Audiologist

III. Other Senses
   A. Olfactory
   B. Taste buds as receptors
   C. Touch

IV. The Senses and Good General Health
   A. Sleep and rest
   B. Nourishing foods
   C. Exercise
   D. Medical check-ups

LEARNING AND EVALUATIVE ACTIVITIES

1. Discuss how one's life would be changed without various senses. What happens to another sense if one is lost?

2. Invite a speaker from the Sheriff's office to talk on the relationship of impaired vision or hearing and pedestrian or traffic safety.

3. Put the names of several occupations in a box. Have the children pick out one of these and relate the importance of the different senses to the occupation, i.e. pilot, telephone wirer, signalman, coffee taster.

4. Demonstrate simple first-aid for eye injuries.

5. Discuss: "Do newborn babies see well?"

6. Discuss: "Why do you sometimes 'see stars' when you bump your head?"

7. Discuss: "Why are the smells of food so strong when you first smell them?"

8. Discuss: "Why do you sniff to smell a flower?"

9. Discuss: "How can you tell from which direction a sound is coming?"

10. Discuss the problem that a person has to face who has never heard sounds or who has lost his hearing.

11. Discuss the danger involved in under water swimming. Example: ear infections, loud sounds, going too deep.

12. Discuss the kinds of noise pollution and probable damage.

13. Have a medical specialist talk to the class about the effect of noise on hearing and show, by using graphs, the amount of hearing loss.

14. Investigate the anti-noise laws in your community.

15. Investigate how position, balance, equilibrium are influenced by space travel.

16. Discuss how the location of sound may be a matter of life or death.

17. List those things which need both sight and sound for accurate identification and appreciation.

18. Blindfold a student and have him identify the area from which clicking sounds are coming.

19. Use illustrations to demonstrate how we see things.

20. List the advantages and disadvantages of contact lenses.

21. Why do some people use tinted glasses?

22. Research efforts: What sensations are involved in eating a dish of ice cream? How does taste enrich our lives? Show the relationship between taste and smell. What effect does the sense of taste have on appetite? How does smoking affect taste, smell and appetite?

23. The rock opera TOMMY can be used to emphasize why the sense of touch is so important. Various pieces can be played to illustrate Tommy's feelings as a child, and in later life. Selections which are especially good are: "Christmas", "There's a Doctor", and "Go to the Mirror."

24. An oral investigation on various topics:

color blindness	Helen Keller
the Braille system	Ray Charles
"Audio-Ball"	Jose Feliciano
one-hand manual alphabet used by deaf-blind people	Stevie Wonder
	Seeing eye dogs

25. Invite the school nurse teacher to demonstrate to the class the proper technique for the safe removal of foreign (non-imbedded) or irritating objects from the eye. Have her discuss general eye care and safety.

26. Make a tape of familiar sounds such as thunder, birds, footsteps, running water, and a train going past. Ask the children to identify the sounds. Capable students may wish to borrow the recorder and tape sounds themselves.

27. Make a "grab bag" out of a draw string bag. Fill it with common objects and open the top just enough for the child to put his hand in. Ask him to choose an object and identify it by touch, without peeking.

28. Look at a picture or a painting for two or three minutes with the whole class. Then remove it and ask the children to draw with crayons what they saw. Ask them to make their drawings as much like they just saw as they possibly can. Then check for accuracy of detail.

29. Go on a "blind walk". Have students discuss their feelings and how they relied more heavily on their other senses.

RESOURCES

BOOKS:

1. Find Out by Touching, Showers, Paul 152 S
2. Junior Science Book of Sound, Anderson, Dorothy 534 A
3. Light and Vision, Mueller, Conrad & Mac, Rudolph 612 M
4. The Listening Walk, Showers, Paul 152 S
5. My 5 Senses, Aliki 612 A
6. Sound, Neal 534 N
7. Sound and Hearing, Stevens, S. S. and Fred Warshofsky 152.1 S
8. True Book of Sounds We Hear, Podendorf, Illa 534 P
9. The Truth About Your Eyes, Derrick Vail, M.D., Collier Books, 1962
10. What is Sound, Reuben, Gabriel H. 534 R
11. Why Glasses, Sands, George 611 S

HEN:

Sensory Perception Materials, BOCES #HN-21

DENTAL HEALTH

OVERVIEW

Of all the professionals today, due to ignorance and misconceptions, the dentist is perhaps the most feared by children and adults. For handicapped children who may have been frightenend by medical procedures and personnel in early childhood, this fear is often more intense. The special education classroom with a dentist as guest, or a special trip to a dentist's office as a group are two situations in which the positive role of the dentist and dental hygienist can be emphasized. The dentist could describe to the children how to take care of their teeth and why. Preventive dental care and the role of the dentist as helper can make subsequent visits to the dentist less ominous.

As is true of this entire health curriculum, no unit can be studied in isolation. This is particularly true in the area of dental health. The child's general health and well being, his nutrition, his use of tobacco and other chemical substances, his heredity and other health problems affect the state of his teeth, and he should be made aware of this to the greatest possible extent.

OBJECTIVES

Suggested Pupil Outcomes:

1. Practice daily activities known to contribute to better health.
2. Relate dental health to general health.
3. Describe how dental health is a necessary requirement for a good appearance.
4. Encourage parents to provide periodic professional treatment.
5. Utilize sound protective measures against accidents to oral structures.
6. Identify those practices which affect dental health.
7. Value the role of proper diet in the development and maintenance of dental health.
8. Evaluate individual growth and development of oral structures.

9. Analyze the characteristics of oral structures.

10. Understand the structure and functions of the tooth to determine the value of dental care.

11. Evaluate the factors that contribute to the process of tooth decay.

12. Investigate the diseases associated with poor oral hygiene.

13. Interpret relationships among proper oral practices, appearance of the teeth and mouth, emotional effects on the individual, and social approval and acceptance of others.

MAJOR CONCEPTS

1. The teeth are calcified structures fixed in bony sockets in the upper and lower jaws.

2. Our teeth help us to chew food for good health, speak clearly, look attractive and have proper facial form.

3. Each tooth has a name which indicates its special job.

4. Food habits influence dental health.

5. Malocclusion is the term applied to irregularities in the position of the teeth and the improper alignment of the teeth upon closing of jaw.

6. Caries usually begin with a small hole, usually in a fissure or flaw of a tooth, in an area where food may be lodged, or where it is difficult to remove food by brushing.

7. Tooth decay is usually caused by acids forming in the mouth.

8. Diseases of the gums and other supporting structures of the teeth are called periodontal diseases.

9. Preventive measures for periodontal diseases include proper tooth care, a well-balanced diet, and regular visits to the dentist.

10. Traumatic injury can crack, loosen, or knock out teeth possibly causing malocclusion and affecting speech patterns.

11. Safe play habits must be developed to avoid tooth injury.

12. Daily personal care promotes dental health.

13. Dental supervision is important in controlling dental disorders.

14. Oral structures were meant to serve throughout a lifetime.

15. While the anatomy for each tooth is the same, the function that each tooth performs is dependent upon its location in the mouth.

16. Many oral problems arise because of poor dental hygiene.

17. Dental personnel should be utilized to guarantee the retention of oral structures throughout the life span of the individual.

18. Personal oral health practices are affected by a variety of conflicting intrinsic and extrinsic factors.

CONTENT OUTLINE

I. How a Tooth Grows and Develops
   A. Look at the structure of a tooth
      1. Root
      2. Crown
      3. Neck
   B. Characteristics of oral structures
      1. Uniqueness of two dentitions
         a. Deciduous
         b. Permanent
         c. Change in number of teeth
      2. Importance of teeth
         a. Nutrition
         b. Appearance
   C. Anatomy and Physiology of the Tooth
      1. Structure
         a. Enamel
         b. Dentin
         c. Cementum
         d. Pulp
      2. Functions of different teeth
         a. Incisors - cutting
         b. Cuspids - tearing
         c. Bicuspids - crushing
         d. Molars - grinding

II. Problems Do Arise!
   A. Malocclusion
      1. Definition - What it is
      2. Causes - What its causes are
      3. Treatment - How it can be treated
      4. Prevention - What you can do to prevent it
   B. Dental caries
      1. Definition - What is decay?
      2. Causes - How do caries develop?
         a. Factors in the incidence
            1. Absence of fluoride
            2. Females - more prone to decay
            3. Some teeth surfaces more susceptible
            4. Refined diet
         b. Contributive factors in tooth decay
            1. Developmental and systemic distubrances
            2. Dental plaque
            3. Mouth bacteria
            4. Acids
            5. Saliva
            6. Food
            7. Irregular alignment
            8. Gum disorders
            9. Poor habits
            10. Emotional disturbances
            11. Smoking

II. C. Periodontal disease
1. Definition - What it is
2. Some common periodontal diseases
a. Gingivitis
b. Vincent's infection
c. Periodontitis
3. Types of treatments available
4. Key to prevention
D. Missing teeth
1. Most common causes
2. Effects on other teeth
3. Treatment varies
a. Fixed partial denture
b. Removable partial denture
4. Preventive procedures

III. Proper Care of Teeth
A. By the individual
1. Healthful diet
a. Foods necessary for maintaining oral health
b. Vitamins and minerals needed for good dental health
c. Certain kinds of foods that are detrimental to good dental health
2. Proper brushing
3. Regular visits to dentist
4. Massaging
5. Rinsing the mouth
6. Use of dental floss
7. Prevention of injuries to the teeth
8. Good dental health habits
9. Fluoridation
B. By the dentist
1. Preventive work
2. Restorative work
3. Special types of dental personnel
a. Orthodontist
b. Periodontist
c. Oral Surgeon
d. Endodontist
e. Dental hygienist

LEARNING AND EVALUATIVE ACTIVITIES

1. Discuss why we need teeth. (Smile, appearance, chewing, talking.)

2. Discuss and diagram a tooth, showing and labelling each part and naming its function.

3. Discuss how teeth grow by examining a model of teeth and jaw.

4. Examine extracted teeth.

5. Discuss the types of teeth various animals have and relate the kind of teeth they have to the kind of food they eat.

6. Show how teeth aid in digestion by experimenting with sugar and water. Put a whole lump of sugar in one glass of water and a crushed lump in another glass. Stir each and observe which dissolves more quickly; cut or crushed food can be changed more easily into liquid form so that our bodies can digest it.

7. Use "tes-tape" (available at drug stores) in saliva following the eating of certain foods to show presence of sugar in food.

8. Estimate the cost of the "sweet tooth" habit, and compare it with the estimated cost of more wholesome food.

9. Discuss the value of certain foods such as apples, celery, carrots, as tooth cleaners.

10. To show that acid will weaken substances containing calcium (such as tooth enamel) place a whole egg in a bowl of vinegar (acetic acid) for about 24 hours. The egg shell should become soft as the vinegar decalcifies the shell.

11. Discuss irregularities in a jaw resulting from: Loss of 6 year molar, too early loss of deciduous teeth, thumb or finger sucking, nail-biting, mouth breathing.

12. Determine how many class members have had accidents injuring teeth. Discuss how they might have been prevented.

13. List activities which might damage enamel (biting hard objects, opening bobby pins, cracking nuts, chewing pencils, chewing ice, chewing hard candy, pumping drinking fountain, falling off bicycles or skates, etc.).

14. Perform (either at school or at home) disclosing tablet test to demonstrate effectiveness of toothbrushing. (Your dentist or local dental society can provide information about securing a supply of these tablets.

15. Discuss the value of the use of toothpastes or toothpowders.

16. Invite dentist to tell how he can repair broken teeth, or send small group to dentist to prepare report for class on how he makes repairs and cost.

17. Discuss reasons for regular visits to dentist.

18. Discuss how to make dental appointments, why it is important to be prompt, and how to remember appointments.

19. Make a chart naming different kinds of teeth and showing at what approximate ages they arrive.

20. Select some common foods, then figure and chart sugar content. Plan substitutes showing sugar content of substitutes, or show spoonful amounts of sugar found in candy, soft drinks and other foods by placing equivalent quantities in test tubes or other container. Each container should be labeled and placed on exhibit.

21. Compare diets of primitive people with diets of more civilized people to determine how diet and chewing of coarse foods influence the teeth and jaw.

22. Make posters illustrating how teeth affect appearance.

23. Write a report on the values of X-ray films in dental health.

24. Make a study of modern dental care as compared with that of 50 years ago.

25. Discuss job possibilities of two applicants with equal qualifications except that one has attractive smile and one has improperly cared for and decayed teeth.

26. Discuss reasons for fear of dentists.

27. Draw and label a picture of a tooth, listing the function of each part.

28. Use dilute acid on a chicken bone to show how excess acid helps to decay teeth.

29. Have a dental hygienist demonstrate steps in proper toothbrushing.

30. Discuss "If carbohydrate foods are so bad for teeth why do teenagers consume so many?"

31. Have a student group investigate why fluorides are not added to local water supply.

32. An interesting activity for the entire class is to analyze a mouth-wash advertisement. What claims does the ad make? What facts are offered? What does the ad really say? Don't forget to look at the picture that accompanies the advertisement. How is it related to the aid? Do ads for mouthwashes seem to say more than they really do?

33. Obtain plaster of paris models of "before" and "after" cases from an orthodontist.

34. Obtain dental X-rays showing restorative fillings, missing teeth, etc etc.

35. Stress the costs of preventative dentistry in comparison to restorative dentistry. (Examples: partial dentures, root canal.)

36. Discuss the importance of maintaining the permanet teeth and good oral health throughout life.

37. Compare periodic "ckeck-ups" for the family automobile to periodic dental check-ups.

RESOURCES

Books:

Atlas of the Mouth, Maury Massler, Isaac Schour, American Dental Society

Clinical Dental Hygiene, Shailer Peterson, C.V. Mosby Company, (for teacher reference)

Dentist's Tools, Carolyn Lapp; Medical Books for Children; Lerner Publications, Inc., 241 First Avenue North, Minneapolis, Minnesota 55401, 1961, 617.6
L

Health and Growth Series, Scott Foresman and Company, Glenview, Illinois 60025

Films:

Dentist in the Classroom, BOCES #832-73, 15 minutes

Project Teeth, BOCES #832-72, 14 minutes

Teeth, BOCES (video cassette), 12 minutes

Kit:

Learning About Oral Health, A Prevention-Oriented School Program, Level II - (4-6), American Dental Association

Filmstrips:

Good Dental Health Is Up To You, Professional Services Division, Proctor and Gamble Company, P.O. Box 563, Cincinnati, Ohio 45201

The Teeth, BOCES #401-13

Filmstrips and Records:

Your Mouth Speaking, 7 filmstrips, Walt Disney Educational Materials, Department F, 800 Sonora Avenue, Glendale, California 91201

One Act Plays:

Toothache Mystery, American Dental Association

HEALTH STATUS AND DISEASE PREVENTION AND CURE

Overview

Remarkably, man has learned in the last century more about the nature of disease and disease processes than was known by earlier societies. Diseases had been treated by faith, omens and incantations. With the advent of inquiring minds and technological progress, information regarding the underlying causes and control of various diseases was disseminated throughout the world. The student should be made aware of the causative agent, the methods of transmission and prevention of communicable diseases through a program of desirable personal health habits.

Despite our best efforts toward health, sometimes a disease like cancer will strike, and we do not know why. For children who have had a parent or friend die, a discussion of the fact that the person is not to blame and the child is not to blame can be very helpful.

The learning disabled or emotionally disturbed child who sees disease and death as so threatening that he/she is overwhelmed can perhaps be helped by talking about such facts as: it is actually a very small proportion of the population which is affected by fatal diseases of unknown origin. Much greater is the number of people who could have helped themselves by giving up smoking, getting regular check-ups, and reporting any of the danger signals which can indicate cancer or any of the other chronic and/or degenerative diseases.

Ultimately, the development of good physical fitness through proper diet and daily exercise is very closely related and essential to achievement and maintenance of good health status.

OBJECTIVES

1. List the basic steps necessary for body fitness.
2. Describe how health status can be evaluated.
3. Describe the roles of various school health personnel in the total school health program.
4. Relate the role of community health personnel in preventing health problems and improving health status.
5. Analyze how the physical, mental, and social dimensions of the individual are related.
6. Define those daily activities which have a positive effect on personal health.
7. Demonstrate that one's physical, mental, and social development is individualized.

8. Evaluate personal health practices as they relate to health status.

9. Describe the communicable disease process.

10. Identify man's role in the transmission of disease.

11. Demonstrate personal habits that will protect oneself and others from communicable disease.

12. Differentiate between communicable and non-communicable disease.

13. Describe the body's natural defenses against disease. Conclude that immunization prevents and controls some diseases.

14. Use the suggested procedures for immunization.

15. Demonstrate ways to protect the individual, his family, and the community from disease.

16. Describe the procedures used to supplement the body's natural defenses.

17. Express an awareness of individual factors involved in the spread of V.D.

18. Examine major roles and contributions of medical research throughout history to modern day.

19. Identify the chronic and degenerative diseases which may deprive individuals of a happy, productive life.

20. Recognize and list signs and symptoms of chronic and degenerative diseases so that early diagnosis and treatment can be obtained.

21. Emphasize the importance of periodic medical examinations to reduce the incidence, retard the effects of, and prevent premature disability and death from chronic and degenerative diseases.

MAJOR CONCEPTS

1. Getting a clear picture of oneself will help one to better understand oneself and others.

2. The individual has a definite responsibility for his personal health and fitness.

3. The health examination is valuable in detecting early signs of defects, disease and growth variations.

4. There are many people in the school family who help the student keep well and contribute to his growth and development.

5. Great differences exist in height, weight and body build among people - all of whom may be quite healthy but growing in the way that is right for them.

6. Physical fitness includes health practices other than exercise.

7. Social, mental and emotional values may be derived from participation in a variety of physical activities.

8. There is a positive relationship between employing desirable health practices and body fitness.

9. Sleep, rest, and relaxation prepare the body for work and play.

10. Engaging in hobbies or changing one's activities helps one to relax.

11. Good body dynamics are important in work and play.

12. Regular bathing removes perspiration, oil, and dirt from skin.

13. Proper care of the hair keeps it clean, healthy and attractive.

14. Proper care of the nails is important to grooming and the prevention of infection.

15. All communicable diseases are caused by infectious agents.

16. There are many kinds of communicable diseases capable of being transmitted from person to person.

17. Many diseases, such as degenerative diseases, which attack man cannot be transmitted from one person to another.

18. Many chronic and/or degenerative diseases may be treated and/or controlled by recognizing their signs and symptoms and obtaining early diagnosis and treatment.

19. Age, sex and heredity sometimes influence an individual's susceptibility to disease.

20. The Public Health Department is concerned with the health of the entire community.

21. Disease is fought on a local and worldwide level.

22. The vectors of disease are transmitted through air, water, direct contact and congenital infections.

23. The body has built-in defense mechanisms to combat disease/

24. There are complex interrelationships involving man, his environment and disease.

25. The interaction of the individual with his environment may contribute to various diseases.

26. In recent years, the increase in morbidity and mortality rates of the chronic and degenerative diseases has become a major concern as it relates to the welfare of prople leading happy and productive lives.

27. Identification and acceptance of known preventive and remedial measures makes it possible to control disease.

28. There are various health programs available to assist the individual in assuming more responsibility for maintenance of good health.

29. The cause of the resurgence of venereal diseases lies within the realm of human behavior.

30. V.D., as an infectious disease increasingly prevalent in today's society, needs to be combatted on all fronts with the individual taking the lead in the fight to stop its spread.

31. With the cooperation of the individual in seeking early treatment, venereal disease can be diagnosed promptly and treated before permanent damage occurs.

32. Venereal diseases are an important public health problem requiring public health measures to insure control.

CONTENT OUTLINE

I. The Hidden and Obvious Nature of Disease
   A. Kinds and types
      1. Communicable diseases
         a. Definition
         b. Transmission
      2. Non-communicable diseases
   B. Causes of diseases

II. History

III. Modern Disease Control
   A. Immunization
   B. Public health measures
      1. Sanitation
      2. Research
      3. Diagnostic techniques
   C. Health Education
      1. School
      2. Home
      3. Public health education
   D. Treatments
      1. Medical
      2. Surgical
      3. Rehabilitation

IV. Significance of Disease
   A. To the individual
      1. Personal efficiency
      2. Longevity
   B. To society
      1. Economics and standard of living
      2. Progress
      3. Population trends
   C. To the world

V. Organisms Involved in Spreading Disease
   A. Bacteria
      1. Streptococcus
      2. Staphylococcus
   B. Virus
      1. Common cold
      2. Influenza
      3. Viral hepatitis
      4. Cold sore
      5. Childhood communicable diseases
   C. Fungi
      1. Athlete's foot
      2. Ringworm
   D. Protozoa
      1. Malaria
      2. Amebic dysentery
   E. Helminths

VI. Methods of Transmission of Communicable Diseases
- A. Direct contact
  - 1. Human waste
  - 2. Nose and throat secretions
  - 3. Other body discharges
- B. Indirect contact
  - 1. Insect vectors
  - 2. Water
  - 3. Air
  - 4. Soil
- C. Congenital Infections

VII. Body Mechanisms to Combat Disease
- A. Skin and mucous membrane
- B. White blood cells
- C. Antibodies
  - 1. Active immunity
  - 2. Passive immunity

VIII. Venereal Disease
- A. Most common types
  - 1. Syphilis
    - a. Transmission
    - b. Stages
    - c. Complications
    - d. Treatment
  - 2. Gonorrhea
    - a. Transmission
    - b. Symptoms
    - c. Complications
    - d. Treatment
- B. Public Health control
  - 1. Cooperation between individual and public health agency
  - 2. Provisions for adequate early diagnosis and treatment
  - 3. Intensive case-finding programs and tracing of contacts
  - 4. Control of patients with V.D. in transmissible stage
  - 5. Health education

IX. Hereditary Diseases - Discussion/Treatment/Prevention
- A. Major disorders
  - 1. Congenital heart
  - 2. Diabetes
  - 3. Specific allergies
  - 4. PKU
  - 5. Cystic fibrosis
  - 6. Hemophilia
  - 7. Sickle cell anemia
  - 8. Mongolism
- B. Genetic counseling as a preventive measure

X. Chronic and Degenerative Diseases

X. A. Cardiovascular problems
    1. Heart
        a. Coronary heart disease
        b. Rheumatic heart
        c. Angina Pectoris
    2. Detection, diagnosis, treatment, prevention

B. Vascular problems
    1. Types
        a. Hypertension
        b. Apoplexy
        c. Arteriosclerosis
        d. Varicose veins
    2. Detection, diagnosis, treatment, prevention

C. Cancer
    1. Common sites
    2. Detection, diagnosis, treatment, prevention

D. Genito-urinary diseases
    1. Common forms of kidney and bladder diseases
        a. Nephritis
        b. Nephrosis
        c. Kidney stones
    2. Detection, diagnosis, treatment, prevention

E. Rheumatic conditions
    1. Types
        a. Arthritis
            1. Gout
            2. Osteoarthritis
        b. Gonococcal arthritis
    2. Detection, diagnosis, treatment, prevention

F. Conditions affecting muscles and nervous system
    1. Most common
        a. Cerebral palsy
        b. Multiple sclerosis
        c. Epilepsy
        d. Muscular dystrophy
        e. Parkinson's disease
        f. PKU (Phenylketonuria)
    2. Detection, diagnosis, treatment, prevention

XI. Appraising a Person's Health
A. Indicators of positive health behavior
    1. Responsibility to self and others
    2. Responsibility of the classroom teacher
    3. Responsibility of the parent

B. Personnel interested in the health status of the individual
    1. Health service staff
        a. Physician
        b. Nurse-teacher
        c. Dentist
        d. Dental hygiene teacher
    2. Other school personnel
        a. Psychologist
        b. Guidance counselor

c. Speech therapist
d. Reading specialist
e. Social worker
f. Attendance teacher

C. Assessment of health status and physical fitness
1. Health examinations
2. Tests and evaluation
a. Vision screening
b. Hearing screening
c. Dental screening
d. Physical fitness tests
3. Evaluative checklist of daily living activities

XII. A Perspective on Health Responsibility of the Individual
A. Education
1. Nature of disease
2. Immunizations
3. Various services available for detection and treatment
4. Control and prevention
B. Maintaining good health
1. Proper nutrition
2. Sleep, rest, and relaxation
3. Caring for our senses
4. Avoiding habit-forming and addicting substances
5. Safety in everyday activities
6. Caring for the skin, hair, and nails
7. Mental fitness
8. Physical fitness and exercise
9. Social-emotional fitness

LEARNING AND EVALUATIVE ACTIVITIES

1. Have pupils devise a checklist for self-evaluation of health. At the end of the unit, have children go over lists again. How would they change it?

2. Have the class develop an inventory of characteristics of a health-educated individual. Include personal living, social relations and relations in the community.

3. Invite a pediatrician and/or psychologist to class to discuss how individuals grow and develop physically and emotionally.

4. Discuss some current figures who are accomplishing in spite of handicaps.

5. Discuss the reasons for visits to the physician, dentist, dental hygienist, school nurse and school psychologist.

6. Have the class discuss the topic: "Why the individuals concerned with health services are so important to the individual and the community."

7. Discuss the values of an annual health examination.

8. Display doctor's instruments or pictures of them. Allow students to listen to the heart and lungs with stethoscope.

9. Explain how muscles develop in size, strength, and efficiency.

10. Discuss: "How can people get the exercise they need living in this mechanized society."

11. Discuss questions such as, "What is disease?", "What accomplishments has man made in combatting disease in the past 50 or 50,000 years?"

12. Introduce terms used in discussion of communicable disease:
    Susceptibility - the condition for establishment of an infection by invasion of virus or bacteria
    Resistence - the condition of lessened susceptibility that may result from immunization, changed nutritional status, and influences of age, sex and heredity.
    Infection - the process by which a microbial organism invades and establishes a parasitic relationship with a host.

13. Class discussion of all possible ways to prevent spread of disease. Review with pupils the things they can do to help keep from spreading disease germs: wash their hands before eating and after using the toilet; cover coughs and sneezes; keep pencils and fingers out of the mouth; use their own towels and washcloths; avoid drinking from a common drinking cup; and stay home from school if they have a cold.

14. Pupils might discuss how they and their families sometimes help improve the health of children around the world. This is done by Halloween collections for UNICEF - a branch of the World Health Organization devoted to the welfare of the world's children. Purchase of UNICEF Christmas cards and note paper also helps provide money to aid UNICEF in its works.

15. Encourage discussion of pupil's ideas about the problems Man has had to conquer in the war against disease. Explore their knowledge about the work of such "health heroes" of the past as Jenner, Pasteur, and Lister.

    The first successful disease-fighting chemical Ehrlich produced was Salvarsan (the antisyphilis drug). Syphilis, should pupils ask, is a venereal disease, often called VD, which is spread by skin-to-skin contact, as in intimate sexual contact. Syphilis and gonorrhea are the most common venereal diseases; they are spread by close intimate contact, generally though not exclusively by sexual contact, with someone who has the disease. (See VD: Facts You Should Know by Andre Blanzaco, M.D., published by Scott, Foresman and Company, 1970.)

    Fleming's discovery of penicillin was a great medical triumph. This antibiotic is particularly effective in the treatment of pneumonia, meningitis, and syphilis. Millions of people owe their lives to the use of penicillin.

    Scientists have continued the search for antibiotics and other germ-killing drugs - a search that has been extraordinarily successful and may be even more so in the future.

    Some basic medical discoveries are presented here: vaccination against smallpox, the "germ theory" of disease, vaccination against rabies, and introduction of antiseptic methods in surgery. The class might construct a "time line" to indicate when these breakthroughs occurred.

16. Examine drops of water (rainwater, river water) under a microscope. Report on types of living organisms found.

17. Ask pupils to tell what they would look for if they were sanitary inspectors: at a restaurant, at a dairy, at a dairy farm, at a food store.

18. To demonstrate the need for refrigeration in preserving foods, obtain two glasses of milk and cover them. Put one in the refrigerator and leave the other outside at room temperature. Compare the milk in each glass for several days noting the difference in appearance, texture and taste.

19. Discuss controls of communicable diseases and non-communicable diseases. How they are alike and different. Make posters or bulletin board displays.

20. Before pupils leave the topic of modern sewage-treatment methods, you might want to stress how such methods have "paid off" in terms of improved community health conditions. Mention, for example, what has happened in the city of Chicago over the years. In 1891, there were 174 typhoid deaths per 100,000 population in the city. As a result of modern sewage treatment methods, water purification, and other health measures, typhoid deaths dropped by 1950 to less than one per 100,000 population. Since 1955 there has not been a single death in Chicago from typhoid fever. Also improved sanitation has paid off in greatly lowered infant mortality rates.

21. Invite the school nurse to the class to discuss eye care and safety.

22. Invite the school nurse to the class to discuss ear care and safety.

23. List the various sensory functions of the body that are dulled by excessive drinking. Beside each dulled function note a related potential problem.

24. Discuss eye and ear defects which interfere with normal hearing and vision. Also discuss how these defects can be compensated for or corrected.

25. Invite the school nurse-teacher to class to demonstrate and explain the instruments used in the school to test hearing and vision.

26. Have students do oral reports on the use of new devices in medical science - electrocardiograph (EKG), antibiotics, surgical techniques, post-operative care.

27. Conduct field trip to local hospital. Have the hematology and pathology section explain the functions and procedures utilized in the diagnostic field.

28. Have students develop a bulletin board display on cardiovascular risk factors.

29. Invite a public health official to speak to the class on the prevention of a syphilis epidemic.

30. Ask an American Cancer Society representative to speak to the class on the modern advances in prevention, detection, treatment, and cure of various types of cancer.

RESOURCES

Books:

Your Wonderful Body, Robert J. R. Follett; Follett Publishing Company, Chicago, Illinois, 611
F

What Is A Human, Melvin L. Alexenberg; Benefic Press, Chicago, Illinois, 1964, 612
A

Films:

About the Human Body, BOCES #831-1, 15 minutes

Be Fit and Live, BOCES, #832-275, 18 minutes

Breast Self-Examination, BOCES #832-398, 15 minutes

Communicable Diseases: They Just Go Around, BOCES #832-288, 18 minutes

Exploring Your Growth, BOCES #831-52, 11 minutes

From One Cell, BOCES #832-364, 13 minutes

Half a Million Teenagers...Plus, BOCES #832-84, 16 minutes

The Heart - Attack, BOCES #833 -123, 25 minutes

The Heart - Counter Attack, BOCES #833-124, 25 minutes

Heart: How It Works, BOCES #831-389, 11 minutes

Heart, Lungs, and Circulation, BOCES #831-65, 11 minutes

Hemo, The Magnificent, BOCES #833, 2014, 59 minutes

I am Joe's Heart, BOCES (video cassette), 26 minutes

I am Joe's Spine, BOCES (video cassette), 26 minutes

Introduction to Acupuncture, BOCES, (video cassette), 22 minutes

Man Alive, BOCES #831, 399, 12 minutes

Man-Made Man, BOCES #833-28, 25 minutes

Mechanics of Life Series:

Blood and Circulation, BOCES #831-256, 9 minutes
Bones and Joints, BOCES #831-257, 9 minutes
Breathing and Respiration, BOCES #831-258, 9 minutes
Muscles and Movement, BOCES, #831-260, 10 minutes

Physical Fitness and Good Health, BOCES #831-192, 10 minutes

Regulating Body Temperature, BOCES (video cassette), 22 minutes

Run Dick, Run Jane, BOCES #832-219, 20 minutes

Solo, BOCES #832-334, 15 minutes

Steps Toward Maturity and Health, BOCES #831-191, 10 minutes

Take Joy, BOCES #833-2020, 10 minutes

VD Attack Plan, BOCES #832-397, 17 minutes

VD Questions, VD Answers, BOCES #832-189, 15 minutes

Vision of Dr. Koch, BOCES #832-185, 21 minutes

Work of the Kidneys, BOCES, (video cassette), 20 minutes

Kit:

Me Now, Hubbard Scientific Company; 2855 Shermer Road; Northbrook, Illinois 60062; available at Cortland-Madison BOCES

Filmstrip:

How to Catch a Cold, Walt Disney, Glendale, California 91201, $3.00

Filmstrips and Cassettes:

Health Heroes Series, BOCES #392-9
Marie Curie
Louis Pasteur
Walter Reed
Florence Nightingale

HENS:

Communicable Diseases, BOCES #HN-5

Heart Disease Materials, BOCES #HN-17

DRUGS

Overview

As a child approaches his teen-age years, his horizons expand. He not only has a greater range and variety of experiences, he finds that the old familiar happenings and relationships may take on new meaning. If watching his friends smoke marijuana at a party is new, seeing his father smoke cigarettes as he has always done may make him stop and think. Why is one alright to do, and the other not?

If a pupil has been developmentally disabled with related or causal physical problems, he/she may have been given a great deal of medication since infancy. He may even know that sometimes medication is given to affect his behavior in school, to make him quiet, and to help him concentrate better so that he can do better work. Naturally, it will be difficult for him to see the difference between these medications and the pills he may see pupils buying and selling on the playground or in the street. He may see drugs as a solution to all his problems.

Drug abusers come from all walks of life. The emotionally disturbed or learning disabled pupil may be particularly vulnerable to the promises drugs hold for the potential user. Therefore, the primary objective of this unit is prevention of drug misuse without discouraging the valuable use of medications as prescribed by a physician.

OBJECTIVES

Suggested Pupil Outcomes:

1. Develop an appreciation for the role of drugs and medicine in the treatment and prevention of disease, control of pain, and the changing of mood and behavior.

2. Acquire accurate knowledge regarding the pharmacological effects of drugs on the body.

3. Discuss the social, psychological, and economic scope of the problems related to drug abuse.

4. Acquire an understanding of oneself as a worthwhile person.

5. Select safe and effective behavior for solving one's problems.

6. Develop self-respect and an accompanying feeling of responsibility for others.

7. Determine the factors related to community responsibility for the provision of resources in prevention, treatment, and rehabilitation of those suffering from the harmful effects of drugs.

8. Investigate the history and legislation of drugs.

9. Assess the laws governing drugs.

10. Interpret the different illegal and legal uses of the drugs.

MAJOR CONCEPTS

1. The role of drugs and medicine in the treatment of prevention of disease is a contribution to improved health status of the people of the United States.

2. Life in modern society would be difficult without the benefits of drugs.

3. Various factors enter into the pharmacological action of drugs.

4. Depressant drugs are commonly used in both medical and non-medical situations.

5. Stimulants are drugs which increase the activity of the central nervous system.

6. Hallucinogenic drugs are mind-altering substances which have few known positive benefits to man.

7. Addicting and hallucinogenic drugs cause problems for the individual and society.

8. Narcotic drugs are the oldest group of drugs, both in terms of use and abuse.

9. The use, non-use, and/or abuse of chemical substances results from a complexity of personal needs, social consequences, and the individual's perceptions regarding their effects.

10. The manufacture and distribution of medicinal narcotics is surrounded by exceptional safeguards based upon many years of United States and world experience. Yet drug abuse still exists.

11. Complex problems are involved in evaluating the pharmacological effects of many agents, especially those which influence feelings and behavior.

12. The physiological changes effected by drugs often give rise to behavior changes.

13. The factors leading to drug addiction are varied and complex.

14. The social, family, and economic ramifications of drug abuse are many and varied.

15. Techniques for treating drug addiction and success of the treatment vary from case to case.

16. Drug legislation, federal and state, is designed to protect the health and welfare of each individual.

17. The reasons individuals give for using drugs are no different from the reasons they frequently give for doing other things in their lives which are often more socially acceptable.

18. The real motivation for drug abuse may be quite different from the reasons given by the individual.

CONTENT OUTLINE

I. Terminology
   A. Potentiation
   B. Abuse/Misuse
   C. Dependence
   D. Tolerance
   E. Glossary of other related terms

II. Positive Uses of Drugs in Society
   A. The role of drugs in the treatment and prevention of disease
   B. Common chemical substances
      1. Not always considered as drugs
      2. Beneficial effects
         a. Analgesics - aspirin
         b. Antibiotics - penicillin
         c. Vitamins - "Chocks" to "1-A-Day"
         d. Minerals
         e. Antacids - "Tums"
         f. Antihistamines
         g. Vasoconstrictors
         h. Vasodilators
         i. Muscle relaxants
         j. Hormones
         k. Coagulants
         l. Anti-coagulants
      3. Barbiturates and Alcohol = potentially deadly combination!

III. Classification of Drugs (Characteristics, Effects, Use/Misuse, Dependence/Treatment)
   A. Depressants
      1. Barbiturates and sedatives
      2. Tranquilizers
   B. Stimulants
      1. Amphetamines
      2. Cocaine
   C. Hallucinogens (Psychedelics)
      1. Marijuana
      2. L.S.D.
      3. Others
         a. Peyote
         b. Mescaline
         c. Psilocybin
         d. DMT
         e. Ibograine
         f. STP

LEARNING AND EVALUATIVE ACTIVITIES

1. Have students construct a "word list" of both medical and slang terms relating to drug use and abuse.

2. Divide class into small groups. Within each group, have one team investigate the possible benefits of the use of hallucinogenic drugs. Have the second team investigate the possible disadvantages of hallucinogens. After compilation of material, have groups report findings to class to determine areas of overlap and difference.

3. Have students construct a chart depicting habit-forming, addicting, or unclassified drugs. Chart to include medical name of drug, slang name, chemical or trade name, source, classification, how taken, effects sought, long-term symptoms, and whether there is a potential for physical or mental dependence.

4. In small class groups, have students determine the personality and emotional problems which may lead to drug abuse. Have groups report to entire class and compare findings.

5. Have students research and report orally the effects of the misuse of drugs on both the family unit and the community.

6. Have selected students research and report on narcotics traffic, from the origin to the user. (May also construct a map.)

7. Have students investigate and analyze the agencies, local, state, and federal, which provide services for narcotics addicts.

8. Invite a person working in the field of narcotics investigation to class to speak on the legal ramifications of drug use and abuse.

9. Debate: "Marijuana should be legalized."

10. Have students interview doctors and/or pharmacists to determine the physiological and psychological effects of drugs on humans.

11. Invite Cortland County counselors from the Mental Health Association into the classroom to conduct a drug seminar with students.

12. Debate: "It is no one else's business if a person uses drugs."

13. Have students develop a drug education crossword puzzle.

14. Have students develop a "Bingo" game using drugs and classifications of drugs in the spaces.

15. It's not uncommon for people to make generalizations about others because of their appearance or way of acting. This is known as stereotyping - thinking or talking about a person as a member of a group

rather than as an individual. Often stereotyping leads to misunderstandings. Role-play a situation in which an innocent, long-haired, jean-clad, bare-footed young person is accused of being a drug-using "hippie" by an older person. When completed, have the class discuss their feelings.

16. Make a collage of people who are taking risks. For example, people who are: working in a dangerous situation, athletes, daredevils. Then have the class explain how these risk situations are different from the risks of people who abuse drugs. Questions to help start the discussion might be:
    Who has the greater control?
    Who is taking the greater chance?

17. Have the students report on the serious drug problem which developed among the American soldiers in Vietnam by answering the following questions:
    What drugs were abused?
    How was Vietnam itself involved in the problem?
    Were the tensions of war a factor?
    Were the young Americans drug abusers before they went to Vietnam?
    Is there any evidence that accidental deaths, or bombing "mistakes" were the result of drug abuse?
    What is being done to help addicted soldiers who have returned to the United States?
    Is the drug problem more serious in the United States because of returning addicted servicemen?

18. Invite an attorney to discuss the laws concerning drugs.

19. Look up and report on the drug laws in other countries.

RESOURCES

Books:

Health: A Quality of Life, John Sinacore, MacMillan Company

Health for Effective Living, Johns, Sutton, Webster, McGraw Hill Company

How Was The Trip? (a play concerning drug abuse), Elizabeth Blake, National Institute of Mental Health; 5600 Fishers Lane; Rockville, Maryland 20852

Tune Into Health, Telice and Carolan, College Entrance Book Company

Films:

Busted, BOCES #832-204, 17 minutes

Dependence: A New Definition, BOCES #832-292, 20 minutes

Drug Problem: What Do You Think?, BOCES (video cassette), 17 minutes

Journey in Time, BOCES #833-85, 26 minutes

Marijuana, BOCES #833-56, 34 minutes

The Perfect Drug Film, BOCES #833-86, 31 minutes

Social Responsibility: It's My Hobby, BOCES #831-298, 10 minutes

Social Seminar Film Series

Up Pill - Down Pill, BOCES #833-70, 24 minutes

Filmstrip and Cassette:

If Drugs Are the Answer ... "What are the Questions?, BOCES #392-5 (set of six)

Record/Cassette:

Drugs Won't Get It - People Will, available from BOCES or free from Mental Health Materials Center; 419 Park Avenue, South; New York, N. Y. 10016

Pamphlets:

Drug Abuse: The Chemical Cop-Out, BOCES #P-85

Drug You?, Ed-U-Press; 760 Ostrom Avenue; Syracuse, N. Y. 13210; single copy of comic 25¢

Marijuana, The Non-Narcotic Dangerous Drug, Community Service Society of New York, 1970

Narcotic Addiction in the New Born, BOCES #P-129

What You Should Know About Drug Addiction, Department of Health, City of New York

Games:

Community at the Crossroads, BOCES #110-31 (To use alone or in conjunction with all or any of the Social Seminar Films)

Drug Debate, BOCES #110-14, 45 minutes per debate

Drug Attack, BOCES #110-30

Drug Decision, accompanying programmed text, teacher's manual and workbook

HEN:

Drug Education Information, BOCES #HN-9; Parts I and II

TOBACCO

Overview

In a society where so many adults smoke in every conceivable place imaginable, including in many doctors' offices and hospitals, and cigarettes are advertised and sold everywhere, it's not the least bit surprising that eventually all children think about smoking. A good many at least experiment at one time or another.

The learning disabled or emotionally disturbed student is no exception. In fact, he/she may be even more vulnerable than the average student to the various appeals made to him/her to smoke.

A young person is more likely to become a smoker if his parents, older brothers or sisters, or friends smoke. Compound this with the fact that learning disabled or emotionally disturbed students often are not as successful in their studies, are not leaders in school activities or headed for college - all of which are normally characteristic of students more likely to smoke.

All considered, the type of student we are discussing here presents a real challenge to the teacher. These individuals can skillfully be helped to reach a wise solution regarding their decision on smoking.

OBJECTIVES

Suggested Pupil Outcomes:

1. Give a brief history and background of tobacco.
2. Develop familiarity with the nature of tobacco.
3. Secure accurate knowledge regarding the pharmacological effects of tobacco on the body.
4. Name the physiological effects of tobacco on the body.
5. Evaluate those aspects of life which lead to the use of tobacco.
6. Investigate the effects of tobacco on the economy of the United States.
7. Analyze the effects of a "smoking environment" on a non-smoker and a smoker.
8. Identify the major problems associated with the use of tobacco.
9. Analyze the recent research and the Surgeon General's Report on SMOKING AND HEALTH.
10. Review the organizations determined to alert the public in the area of tobacco.
11. Through the sufficient understanding of the smoking problem, make an intelligent personal decision whether to smoke or not to smoke.

MAJOR CONCEPTS

1. Tobacco has played an important part in the history of our nation.
2. The components of tobacco and its by-products are many.
3. Smoking directly affects many of the body's functions.
4. Cigarette smoking is causually related to lung cancer in men. The risks increase with the duration and number of cigarettes smoked per day.
5. The mortality rates of cigarette smokers over non-smokers is particularly high for a number of other diseases including chronic bronchitis, emphysema, cancer of the larynx, peptic ulcers, and heart and coronary disease.
6. The reasons for smoking seem to be related to a range of diverse psychological and sociological behaviors which may be set off by different personal needs.
7. Smoking is an expensive as well as a dangerous habit.
8. Smoking affects the economy in loss through fires, unemployment, disability, death, and other areas.
9. Cigarette advertising is not always accurate and often is misleading.
10. The Surgeon General's Report has made an impact on the American people, advertising, researchers, and other areas.
11. There are a variety of agencies interested in the health of the individual in regard to tobacco.
12. Economic reasons mainly account for research efforts designed to maintain the tobacco industry and nroduce a cigarette that is not harmful to health.
13. Federal legislation has required cigarette manufacturers to warn the public of the risks of cigarette smoking.
14. Many states have laws and regulations concerning the sale of tobacco products.
15. A mother's smoking has physiological effects on her unborn child.
16. Smokers help to pollute the environment for non-smokers.

CONTENT OUTLINE

I. History and Background of Tobacco
   A. Origin
   B. Subsequent use

II. Nature of Tobacco
   A. Chemicals contained in tobacco
   B. Chemicals contained in smoke

III. Physiological effects of tobacco on the body
   A. Heart
   B. Blood vessels
      1. Buerger's disease
      2. Hypertension
      3. Coronary artery diseases
   C. Respiratory system
      1. Cancer
      2. Emphysema
      3. Chronic bronchitis
   D. Digestive system
      1. Altered taste ability
      2. Ulcers
   E. Unborn child
   F. Physical performance

IV. Psychological Need for Tobacco
   A. The "smoker personality"
   B. Developing the smoking habit
      1. Habit forming
         a. Taught by others
         b. Learned through experiences
      2. Desirable and undesirable habits
         a. Desirable habits
            1. Effective automatic behavior
            2. Personal satisfaction
         b. Undesirable habits
            1. Decreased personal effectiveness
            2. Personal frustration
      3. Reasons for development of the smoking habit
         a. Curiosity
         b. Peer pressure
         c. Imitation of adult behavior
         d. Other
   C. Attitudes toward smoking

V. Economics of Tobacco
   A. Importance as a national product to the economy of the United States
   B. The individual and the economics of tobacco use

VI. Problems Associated with the Use of Tobacco
- A. Tobacco breath and periodontal disease
- B. Fire loss
- C. Employment
- D. Morbidity and mortality
- E. Cleaning costs
  - 1. Homes
  - 2. Clothes
- F. Advertising
- G. Smoking in the presence of objecting non-smokers
- H. Being in places where smoking is not permitted and the desire or need to smoke exists

VII. Scientific Facts and Research
- A. Surgeon General's Report
- B. Other significant and pertinent studies

VIII. Organizations Concerned with the Tobacco Problem
- A. American Cancer Society
- B. American Lung Association
- C. American Medical Association
- D. American HeartAssociation
- E. American Dental Association

IX. Legislation
- A. Federal
- B. State

LEARNING AND EVALUATIVE ACTIVITIES

1. Have a group of smokers and non-smokers debate the pros and cons of smoking.

2. Debate the beneficial effects of smoking in the area of mental health.

3. Develop a questionnaire for a school survey on smoking attitudes and habits. Have the committee report the findings back to the class.

4. Invite a representative of a local medical facility to speak to the class on the topic of "smoking and health."

5. Have students research and report to class on the forces in society that encourage smoking: psychological motives, social pressures, advertising media.

6. Have a student read and report on the Surgeon General's Report on SMOKING AND HEALTH.

7. Have a committee of students organize, develop, and maintain a tobacco information center in the school library. Have them contact the American Cancer Society and other interested agencies to acquire materials to stock the center.

8. Using the school's video-tape equipment, prepare a fifteen minute skit about smoking and health to be presented to a specific grade level. (i.e. 4-6)

"Are You Smoking" - to the tune of "Brother John"
Are you smoking, are you smoking, Brother John, Brother John,
Your heart and lungs may falter, your breathing it will alter,
Put it out, put it out.

"Please Kick the Habit for Me" - to the tune of "My Bonnie Lies Over the Ocean"
My mommy is constantly smoking,
My daddy keeps lighting up too,
Little brother is constantly coughing,
While the air in our whole house turns blue.

Please mom, please dad,
Please kick the habit for me today.
Please mom, please dad,
Please kick the habit for me.

"Don't Light Up That Cigarette - to the tune of "Jingle Bells"

Don't light up that cigarette,
It is bad for you.
Put it down, don't light it up,
You'll be sorry if you do.

Smoking only slows you down,
It takes the fun away.
So don't light up that cigarette,
Let's live the healthy way.

9. Have a class committee prepare a bulletin board display on the hazards of smoking.

10. Analyze the types of appeals the cigarette companies utilize.

11. Form student committee to suggest ideas for a smoking discouragement program for the school and community. Create posters and collages to display in the school and community.

12. Panel discussion: "Should a government have the power to control cigarette smoking?"

13. Divide the class into groups and have them research personality traits that are frequently more common among smoker than non-smokers. Have each group report to the entire class to compare conclusions.

14. Role-playing situation: Have one student pretend he has just lit a cigarette. Others want to ask him not to smoke. Have different students develop responses to this situation.

15. Perform skit showing how individuals are talked into the use of tobacco by peer pressure.

16. After listing a number of diseases commonly believed to be caused or aggravated by smoking, assign a small group of students to find the facts which have been determined by research and consider the evidence in each case.

17. Have students prepare graphs comparing heart disease rates among smokers and non-smokers, and the correlation between the increase in the incidence of heart disease and the consumption of tobacco.

18. Have students prepare graphs or charts illustrating the incidence of lung cancer and emphysema among smokers as compared with non-smokers.

19. Using an anatomical chart, have students point out the location of mucous membranes and organs of the respiratory and circulatory systems.

20. Have students calculate the annual expense of smoking one pack of cigarettes daily. Calculate the amount of interest this money would accumulate in a savings account at the current interest rate. By checking

newspaper ads, determine what items could be purchased in lieu of the spending on cigarettes.

21. Objective examination of concepts and ideas presented.

22. Subjective (essay) exam of concepts and ideas.

23. Teacher and student-teacher evaluation of oral presentations, charts, graphs, displays.

24. Student self-evaluation of projects prepared.

25. Attitudinal survey of the smokers and non-smokers within the class. Give a pre and post test.

26. Evaluate effectiveness of "information" center on basis of the use of its facilities and the extent to which valuable information is provided.

27. Stage skits to illustrate why a young person might begin to smoke.

28. Have students discuss for one minute each, the following topics:
The kind of person I would like to be ten years from now.
What I want most out of life.
Then ask them how tobacco would enhance or detract from this picture.

29. Construct a smoking machine.

30. Debate - "Which is worst over a lifetime - alcohol, tobacco, drugs?"

RESOURCES

Books:

Health: A Quality of Life, John Sinacore; MacMillan Company

Health for Effective Living, Johns, Sutton, Webster; McGraw Hill Company

Hidden Persuaders, Vance Packard; David McKay Co., Inc. 1957

Teen-ager and Smoking, Milgram, Rosen Publishing, 1972

Tobacco and Your Health - The Smoking Controversy, McGraw Hill Company

Tune into Health, Felice and Carolan; College Entrance Book Company

Films:

Breath of Air, BOCES #832-361, 21 minutes

Decision for Mike, BOCES #832-399, 14 minutes

The Drag, BOCES #831-151, 8 minutes

Inside Magoo, BOCES #831-401, 10 minutes

Is Smoking Worth It?, BOCES #832-365, 16 minutes

Smoke Screen, BOCES #831-379, 5 minutes

Smoking, It's Your Choice, BOCES #832-414, 15 minutes

Smoking Past and Present, BOCES #832-366, 15 minutes

Time for Decision, BOCES #832-367, 16 minutes

Time To Stop Is Now, BOCES #831-394, 4 minutes

Tobacco Problem: What Do You Think?, BOCES (video cassette), 17 minutes

TV Messages on Gigarette Smoking, BOCES #832-371, 12 minutes

Who, Me?, BOCES #832-368, 19 minutes

Filmstrip and Cassette:

A Stop Smoking Program, BOCES #392-16

Cigarette Smoking: Take it or Leave it, BOCES #392-18

I'll Choose the High Road, BOCES #392-13

Professor Persuader, BOCES #392-15

To Smoke or Not to Smoke, BOCES #392-17

Posters:

All You Smokers Who Plan to Quit Someday, BOCES #P-135

Beautiful Things Happen When You Don't Smoke Cigarettes, BOCES #P-77

Best Tip Yet - Don't Start, BOCES #P-76

Breathe In Love - Don't Smoke Cigarettes, BOCES #P-166

Happy People Don't Smoke Cigarettes, BOCES #P-168

Life is So Beautiful, Stay Alive, Don't Smoke Cigarettes, BOCES #P-73

No Thanks Eve, I'd Rather Have An Apple, BOCES #P-75

Smoking is Very Debonair, BOCES #P-69

Smoking is Very Glamorous, BOCES #P-71

Smoking is Very Sophisticated, BOCES #P-70

Smoking Pollutes You and Everything Else, BOCES #P-130

Thank You For Not Smoking, BOCES #P-164

There's Lots of Love and Living Ahead, (White Couple) BOCES #P-74

There's Lots of Love and Living Ahead, (Black Couple) BOCES #P-167

Pamphlets:

The Alpha-Butt of Smoking, BOCES #P-41

Cigarette Quiz, BOCES #P-3

Cigarette Smoking and Lung Cancer, BOCES #P-108

Danger, BOCES #P-68

Emphysema, BOCES #P-45

Huff and Puff, BOCES #P-62

Listen Smokers, BOCES #P-136

Smoke Cigarettes? Why?, BOCES #P-36

What Everyone Should Know About Smoking and Heart Disease, BOCES #P-1

What To Tell Your Parents About Smoking, BOCES #P-4

Women Are Kicking the Cigarette Habit, BOCES #P-42

HEN:

Smoking, BOCES #HN-22; parts I and II

ALCOHOL

Overview

The acute social and domestic problems of alcoholism are reflected in broken homes, family misery, neglected children, automobile accidents and criminal problems, unemployment, and poverty. A tragically large number of special education students will know this without its having to be said, and their feelings should be considered in presenting information about alcoholism to the class.

Additionally, it may be harmful to say that the condition of alcoholism is brought on knowingly and that every victim of alcoholism has made the choice to drink. Scientists now recognize that among other things heredity, body chemistry, and psychological factors such as unresolved grief can sometimes make a person more vulnerable to excessive drinking. Pupils should not be made to think of an alcoholic parent as choosing to be what he is; he is not "bad," it is alcoholism which is bad. The positive steps toward physical and mental health which can be taken, beginning in childhood, to help prevent alcoholism, should be the subject here.

The purpose of this unit is to help the teacher of handicapped children deal with some complex social problems; but because these problems are complex and affect each individual differently, it is impossible to do more than make suggestions and offer a few guidelines.

OBJECTIVES

Suggested Pupil Outcomes:

1. Develop a familiarity with the nature of alcohol.
2. Identify the physiological effects of alcohol on the body.
3. Investigate the social, psychological and economic scope of the serious problems related to alcohol use and abuse.
4. Acquire an understanding of self as a worthwhile person.
5. Distinguish between acceptable and unacceptable drinking patterns.
6. Develop self-respect and a feeling of responsibility for others.
7. List the effects of alcohol abuse on the individual, family and society.
8. Identify the factors related to community responsibilities regarding the alcohol problem and provision of resources for prevention, treatment and rehabilitation.
9. Investigate and acquire substantial knowledge of the legal ramifications of alcohol use and abuse.
10. Differentiate between satisfying and integrative uses of alcohol and those which can produce immediate or delayed situational or chronic problems.

MAJOR CONCEPTS

1. The origin of alcohol dates back many centuries and its use has varied with cultures.
2. The forms of alcohol are produced in many ways.
3. Ethyl alcohol is usually obtained from the fermentation of fruits and grains.
4. Alcohol may be used in many ways to benefit as well as adversely affect mankind.
5. Alcohol affects the human body in many ways.

6. Continued excessive use of alcohol brings physical and mental deterioration.

7. The reasons for drinking or abstaining from drinking vary with each individual.

8. The heavy drinker and the chronic alcoholic create many of the social problems associated with the use of alcohol.

9. Alcohol and alcoholism affect our economy in many ways.

10. Immoderate use of alcoholic beverages is allied to social and family problems, automobile accidents and crime.

11. Behavior of the average drinker can be correlated with the percentage of alcohol in the blood stream.

12. The sale and use of alcoholic beverages is controlled by law.

13. Medical science has classified alcoholism as a disease for which there is no specific cure.

14. The basic treatment of alcoholism is concerned with the alcoholic recognizing there is a problem and then trying to eliminate the cause of stress situations.

15. The community is involved in the rehabilitation of alcoholics.

16. Prevention of alcoholism is a world-wide problem.

17. Impaired judgment and the relaxing of inhibitions represent significant hazards associated with drinking.

18. The person who decides to abstain from the use of alcohol should not be pressured to drink.

19. Excessive drinking does not indicate adult status or achievement.

20. When alcohol is used, it should be an adjunct to other pleasurable activities rather than as the focus of an activity or as a problem solver.

21. Drunkenness indicates a person has overdosed with a drug and is particularly prone to impaired judgment and actions.

22. If a person decides to drink alcohol, he should know that dangerous blood levels can be avoided by restricting drinking to small amounts of alcohol, in appropriate dilution, taken slowly, and preferably in combination with food.

23. Uncontrolled drinking, or alcoholism, is not a weakness or moral defect, but an illness which can be treated successfully.

CONTENT OUTLINE

I. Brief History of Alcohol
   A. Origin
   B. Cultural uses
   C. Prohibition
   D. Terminology

II. Types of Alcohol
   A. Methyl
      1. Production
      2. Uses
   B. Ethyl
      1. Production
         a. Beer
         b. Wine
         c. Spirits
      2. Uses
         a. Celebrations
         b. Parties
         c. With meals
         d. Self-medication (as a drug)
         e. Escape

III. Drinking Society?
   A. Prevalence of drinking in the United States
      1. Number of people who drink
      2. Number of people who do not drink
   B. Society's ambivalent attitudes about alcohol
      1. Minimal legal controls
      2. Drinking practices
      3. Advertising and other enticements

IV. Physiological Effects of Alcohol
   A. Brain
   B. Heart and blood vessels
   C. Stomach
   D. Liver (diet)
   E. Kidneys
   F. Other (eyes, skin)
   G. Interaction of alcohol with other chemicals (i.e. barbiturates)

V. Psychological Effects of Alcohol
   A. Individual
      1. Drink - why or why not?
      2. Characteristics of person
      3. Kinds of drinking
      4. Responsible drinking behavior
   B. Family
   C. Employment
   D. Community
   E. Society

VI. Alcohol and Driving
   A. Blood-alcohol levels
   B. Penalties for violation of the law
   C. Accidents
   D. Insurance risk

VII. Alcohol and Crime
   A. Major statistics
   B. What can be done

VIII. The Adolescent and Beverage Alcohol
   A. Reasons for drinking
      1. Curiosity
      2. Peer pressure
      3. Adventure
      4. Imitation of adults
      5. Unaware of dangers
      6. Other
   B. Reasons for not drinking alcohol
      1. Personal reasons
      2. Religious training
      3. Parental pressures
      4. Other

IX. Alcoholism
   A. Theories of causation
   B. Incidence
   C. Characteristics of alcoholism
   D. Steps to alcoholism
   E. Diseases related to alcoholism
   F. Rehabilitation and treatment

LEARNING AND EVALUATIVE ACTIVITIES

1. Debate: "Alcohol is a social grace."
2. Individual research and report on what characterizes an emotionally mature and immature person.
3. On a prepared picture of a human anatomical form, have students label and color code the organs affected by alcohol.
4. Invite a physician to class to discuss the depressant effects of alcohol on the human body.
5. Using advertisements from magazines, newspapers, etc., have students prepare a collage for bulletin board display on alcohol showing its use in industry and medicine.
6. Student report, oral or written, on differences between social drinking, drunkenness, and alcoholism.
7. Have students construct a crossword puzzle on the vocabulary relating to alcohol.
8. Oral report on reasons for student drinking. (Perhaps a poll taken by class members.)
9. Have a student prepare a wall chart identifying the warning signs of chronic alcoholism.
10. Have students discuss the topic: "Alcohol and gasoline don't mix."
11. Student oral report on problems suffered by a family if one member drinks immoderately.
12. Debate topic: "What should be the legal age for the consumption of alcoholic beverages?"
13. Debate topic: "Should teen-agers be served alcoholic beverages in their homes or in the homes of their friends?"
14. Student research and report on the various diseases resultant from alcohol abuse.
15. Individual research and report on the various methods and techniques used in treating alcoholics.
16. Student investigation and report on the local, state, and federal agencies which offer aid to alcoholics.
17. Invite a member of an agency offering aid to alcoholics to speak to classes on the functions of the organization in helping alcoholics.

18. Have local Police Department demonstrate the balloon test procedure, the drunkometer, etc. for alcohol consumption.

19. Have students formulate a social situation in which a teen-ager might find himself tempted to drink. A panel may then discuss the alternatives and recommend solutions for the individual.

RESOURCES

Books:

Health: A Quality of Life, John Sinacore, MacMillan Company

Health for Effective Learning, Johns, Sutton, Webster, McGraw Hill Company

Tune Into Health, Telice and Carolan, College Entrance Book Company

Alcohol: Our Biggest Drug Problem, Joel Fort, M.D., McGraw Hill Company 1973

Atlas of Wines, Hugh Johnson

Encyclopedia of Wines and Spirits, Alexis Lichme

Films:

Alcoholic Within Us, BOCES #833-109, 23 minutes

Alcoholism: A Model of Drug Dependency, BOCES #832-281, 20 minutes

The Alcoholism Film, BOCES #833-372, 23 minutes

Alcohol Problem: What Do You Think?, BOCES (video cassette), 18 minutes

Alcohol and You, BOCES #833-55, 28 minutes

Curious Habits of Man, BOCES #832-58, 13 minutes

Articles:

"Alcoholism - New Victims, New Treatments", Time Magazine, April 22, 1974

HEN:

Alcohol Education Materials, BOCES #HN-1, Parts I and II

MENTAL HEALTH

OVERVIEW

A normal individual has a satisfactory concept of himself and of the culture in which he lives. He can control his emotions and adequately meet situations that occur in his environment. The observable features of the adjustment is the individual's personality -- the sum total of traits and characteristics that makes each person a unique individual.

For some handicapped children, the problem is not so much controlling their emotions as avoiding withdrawal. Psychologists see the quiet, introspective, withdrawn child as much more seriously disturbed than the one who is hyperactive, aggressive, and acting out. The special education teacher must work with both types of children to seek a middle ground where acting out is controlled, but the child is courageous enough to interact with his environment.

There are no easy answers to the question, "How can that be done?" The approach will depend on the child. But one activity which is very enhancing to the individual's ego, is to help others. When this type of activity can be extended to include the community and the environment, it is beneficial indeed.

Additionally it is important for the teacher to touch upon, with all children, the subject of death; for it is the ultimate end to all living things. A realistic attitude, developed at the earliest possible age, is important in dealing with emotional conflicts encountered with a death of a family member, friend, or pet. Basic understandings related to loss of significant others need to be discussed and dealt with before or while they are encountered. This is an important step toward the goal of mental health because it can prevent the emotional crises which result from unresolved grief and guilt if the child does not have some understanding of death and the emotional reactions which surround it.

OBJECTIVES

Suggested Pupil Outcomes:

1. Recognize mental health as one aspect of total health.
2. Demonstrate respect for himself and others.
3. Identify himself/herself as a person of worth.

4. Develop and maintain satisfactory interpersonal relationships.

5. Interpret and observe rules for living that make a happier and healthier life for all.

6. Develop one's fullest capacity to love and respect.

7. Attempt to become a mature personality able to face life's problems.

8. Strive to achieve self-realization and happiness.

9. Demonstrate understanding and emotional control by adequately meeting situations that occur in one's environment.

10. Express understanding of oneself, one's value system and how it is related to total world subsistence.

11. Conclude that a healthy personality is developed by accepting oneself and adapting to life's situations.

12. Interpret the signiticance of emotions that may strengthen or weaken one's personality.

13. Identify the many and varied sources of stress and the means available to ameliorate or elimate stress.

14. List and explain the most used and overused defense mechanisms.

15. Express the idea that mental illness can be treated and that early diagnosis and treatment favor recovery.

16. Differentiate the various mental health personnel that assist in the treatment of mental disorders.

17. Compare various facilities that care for people with personality and mental problems.

18. Investigate the various forms of mental retardation.

19. Conclude that the differences among individuals affect the substance and quality of life.

20. Infer causal interrelationships between diverse individual environmental backgrounds and the development of a variety of individual goals, activities, and achievements.

21. Discuss and gain an understanding of death - hopefully before experiencing the loss of a significant other.

22. Develop an awareness that death is the final realization in the life of each individual in fact, the ultimate end of all living things.

23. Conclude that there is a need to share love, empathy and sympathy with individuals who are experiencing an emotionally charged situation related to loss of a significant other.

MAJOR CONCEPTS

1. Everyone is different. You can do certain things well, better than others; yet, some can do things better than you.

2. All human beings have many needs in common.

3. Understanding one's basic needs is necessary for good mental health.

4. Personality - the sum total of traits and characteristics - makes each person a unique individual.

5. Heredity plays a major role in one's personality.

6. Environmental deprivation and neglect result in a loss of human potential.

7. Personal values emerge as a result of family influence and other varied experiences.

8. Maturity consists of physical and personality changes.

9. Maturity is the ability to deal with situations of your life in a realistic and effective way.

10. A mentally healthy person feels a sense of responsibility to his neighbors and fellow men.

11. A person with good mental health respects the many differences they find in other people.

12. Individuals have varying capacities and abilities for living and working together.

13. Love, anger and fear are examples of major basic emotions.

14. There are various types and stages of love.

15. Mental mechanisms are used in varying degrees to deal with stress.

16. Some physical illnesses are conditioned by emotional conflicts.

17. Mental illness is classified by the severity of its symptoms, the type of symptoms, and by the degree to which they incapacitate the patient for normal living.

18. Continued efforts through major research endeavors are needed in the area of mental retardation.

19. Help is available to assist in resolving mental health problems.

20. In order to understand death, whatever the cause, you need to know about it.

21. The person with suicidal intentions is under intense mental strain and needs understanding coupled with professional guidance.

22. Life is birth, growth, and finally death.

CONTENT OUTLINE

I. The Individual as a Unique Entity
   A. Heredity
      1. Fertilization
      2. Sex determination
      3. Autosomal inheritance
   B. Environment
      1. Abiotic factors
      2. Biotic factors

II. The Totality of the Individual
   A. Physical factors
   B. Behavior
      1. Drives
      2. Urges
   C. Individual traits
      1. Desirable
      2. Undesirable
   D. Continuous growth of personality throughout life

III. Fundamental Needs of the Individual
   A. Physical needs
      1. Nutrition
      2. Shelter
   B. Emotional needs
      1. Love
      2. Security
      3. Independence

IV. Fundamental Emotions and Personality
   A. Love
      1. Self love
      2. Love of parents and family
      3. Love for a friend
      4. Heterosexual love
      5. Homosexual love
      6. Love for animals
   B. Fear
      1. Superstition
      2. Anxiety
      3. Phobial
   C. Anger
   D. Other beneficial vs. detrimental
   E. Controlling emotions

V. Review of the Nervous System
   A. Definitions and terminology
   B. Structure and functions

VI. Personality
- A. Definition
- B. Factors affecting personality
  1. Heredity
  2. Physical condition
  3. Environment
  4. Past experiences
  5. Family influence

VII. Personality Development
- A. Theories
- B. Psychological stages or phases
- C. Self-concept
- D. Sense of trust and security
- E. Attitudes
- F. Values

VIII. Reactions to Stress
- A. Anxiety and its physiological and psychological effects
- B. Mental mechanisms
  1. Types
  2. Purpose
  3. Use of
  4. Overuse of

IX. Abnormal Reactions to Stress
- A. Psychosomatic
  1. Gastro-intestinal disorders
     a. Ulcers
     b. Colitis
  2. Hypertension
  3. Allergies
  4. Back problems
  5. Headaches
- B. Neurosis - differentiation
  1. Anxiety neurosis
  2. Guilt neurosis
  3. Hypochondria
  4. Phobia
  5. Conversion hysteria
  6. Obsessions and compulsions
  7. Depressive reactions
  8. Dissociative reaction (amnesia)
- C. Psychosis - differentiation
  1. Schizophrenia
  2. Manic depressive
  3. Organic psychosis
  4. Involutional psychosis

X. Treatment of Mental Disorders
- A. Psychotherapy
- B. Group therapy
- C. Recreational therapy
- D. Drug therapy
- E. Occupational therapy
- F. Electric shock or insulin shock therapy
- G. Changing attitudes towards mental illness

XI. Mental Health Personnel
- A. Psychiatrist
- B. Psychologist
- C. Psychoanalyst
- D. Psychiatric social worker
- E. Psychiatric nurse
- F. Attendant
- G. Family Medical Physician
- H. Religious consultant
- I. Guidance personnel

XII. Facilities
- A. Psychiatric hospitals
- B. Community mental health centers
- C. Some general hospitals
- D. Rehabilitation centers
- E. Veteran's Administration Hospitals
- F. Private physicians, psychiatrists, and psychoanalysts
- G. Home care or foster home

XIII. Mental Retardation
- A. Extent of the problem
- B. Causes
  1. German measles
  2. Birth injuries
  3. Lead poisoning
  4. Ingestion of other chemical substances
  5. Genetic factors
     a. Mongolism
     b. PKU
  6. High fevers
  7. Metabolic disorders
- C. Types
- D. Treatment and facilties
- E. Education of the retarded
- F. Preventive measures

XIV. Understanding Death
- A. Causes and related feelings - anytime, any age
  1. Accident
  2. Disease
  3. Natural causes
  4. Homicide
  5. Suicide
- B. Loss of one's own life versus loss of a significant other person
- C. States of dying and reactions to death
- D. Cultural variations in death rites
- E. Economics of death and funerals
- F. Talking to children about death
- G. Looking at what you can learn at a cemetery
- H. A dignified death and euthanasia
- I. Composing a will

XV. A Closer Look at Self-annihilation
- A. Suicide - a hushed-up subject
- B. Incidence
  1. Numbers
  2. Peak times of year
  3. Peak times a day
- C. Those most susceptible
- D. Composite picture of suicidal person
- E. Causes
  1. Among the young
  2. In the middle-aged
  3. Among the aged
- F. Methods
  1. Slow - sub-intentional; death-oriented behavior; life shortening
     a. Overeating
     b. Overworking
     c. Heavy smoking
     d. Alcoholism
     e. Drug abuse
  2. Autocide
     a. Driving too fast
     b. Passing on a hill
     c. Running red lights
  3. Fast-intentional
     a. Wrist slashing
     b. Shooting
     c. Hanging
     d. Poisoning
     e. Overdose
     f. Jumping
  4. Preferred methods by men vs. women
- G. Clues
  1. Weak sense of purpose
  2. Time of year - April/December
  3. Often at home with parents in next room
  4. Previous unsuccessful attempt
  5. Sudden change in personality
  6. Indication of intentions
     a. Person makes sudden and outright generous grants
     b. Member of club or church may resign with explanation that he's going to move away
     c. Giving gifts or prized or sentimental objects to friends or relatives
     d. Hinting comments - "You'll be sorry when I'm gone."
  7. Physical complaints (insomnia, poor appetite, etc.)
  8. Antisocial
  9. Loss of interest in previously enjoyed activities
  10. Overly helpful, never complaining, unusually happy - contrary to normal state

XV. H. HELP!

1. Understanding - relieving a heavy burden of punishing guilt feelings and unbearable emotional stress
2. Listening - desperate need to ventilate burdensome feelings - concentrate not only on what is said, but read between the lines
3. Communicating - speaking of suicide as immoral acts blocks possibility of further communication - identify source of distress
4. Giving hope - moves people out of suicidal ruts
5. Professional guidance
6. Organizations
   a. Mental Health Clinics
   b. Suicide Prevention/Intervention Centers

LEARNING AND EVALUATIVE ACTIVITIES

1. Divide the class into as many groups as necessary. Have each group explore the influence of each of the following on personality:
   - Heredity
   - Environment
   - Health
   - Education
   - Church and Religion
   - Interests
   - Family
   - Friends

2. Have each student construct a self-evaluation list of what he considers his personality strengths and weaknesses.

3. Have each student select one person that he or she has a great admiration for and also one they find particularly annoying. For each person, list personality traits applicable for each.

4. Conduct a panel discussion on how value systems affect behavior patterns:
   - Initiative
   - Persistence in completing a job
   - Cheating
   - Stealing
   - Tardiness
   - Promiscuity
   - Respect for others
   - Courage
   - Making the "right" decision

5. Have students construct a list of factors which illustrate prejudice. In an oral presentation, illustrate how these are indicative of one's value system.

6. Assign a research topic on constructive and destructive criticism. Have students report their finding to the class and include examples of each type of criticism. Another approach might be to develop a role-playing situation using techniques of either type of criticism.

7. Have the class think back to situations in which peer pressure made them feel either good or bad. Have them relate the situation and tell how they felt.

8. Have students construct a chart depicting which types of disorders are considered to be psychosomatic in nature.

9. Construct a chart relating situations which cause stress and anxiety.

10. Construct a check list of how to deal with emotional problems. At the end of a pre-determinded period of time, have students analyze which methods may have been successful for them.

11. Construct a check list (in chart form) and have students devise definitions for each mental (adjustment) mechanism they use (or have used). Each day, have them select from the list any of the mechanisms they have used since the class period before (day before). Have them analyze why they may have used it.

12. Have a group of students investigate the facilities - local, state, and federal - which offer aid to persons with emotional problems. Analyze the types of aid available.

13. Prepare a list of the various types and qualifications of personnel to whom people may take their problems.

14. Have student groups investigate psychosis and neurosis. For each, describe the disorder and relate the chief characteristics.

15. Assign students to identify and describe the following types of mental illnesses:

Schizophrenia	Hysteria
Paranoia	Neurosthenia
Manic-depressive	Psychopathic personality
Senile dementia	

16. Have students research the importance of the basic emotions to normal behavior.

17. Have students compile a list of the various roles they play during the day. Explain why it is necessary to act in such a way.

18. Analyze TV commercials and indicate to which of the basic needs or desires the appeal is made.

19. Situation role-play: "I've got a problem." Have any member of the class bring up a continuing, perplexing situation which causes him inconvenience, difficulty or discomfort. After the class members have asked enough questions to be certain they understand the nature of the problem, have them suggest solutions, particularly what they did or might do on a similar situation. Also, have students give their rationale for their solutions.

20. Play the "Survival Game": Only seven of fifteen persons may be saved after a nuclear attack. All decisions must be unanimous. (Best to divide class into small groups - then come together to try to get a class unanimity on the survivors.)

21. List various behaviors of Americans, or other peoples, which occur largely because "the people were brought up that way," rather than because they serve a particular purpose. Analyze why.

22. Role-playing: "All in the Family." Select a recent incident, unresolved, which has caused confusion or turmoil. Have persons in class assume roles of Archie Bunker, his wife, Edith (Dingbat), daughter, Gloria, and son-in-law, Michael (Meathead). One or more persons take each role, each commenting as one person. Have a discussion of the issue from the point of view of each character being portrayed. Periodically change roles and continue the discussion. Afterwards, hold group discussions on how each felt in the role being portrayed, what they learned about the character they portrayed, and what effect the role-switch had on them. They could also respond to - if they viewed the issue differently, and what problems or solutions have occurred to them as a result of the game.

23. Have students develop two lists as follows:
    a. Standards of behavior which are determined by society as a whole, differentiating between those initiated by law and those which exist due to tradition.
    b. Standards of behavior determined by the individual.

    Compare and discuss the findings.

24. Have students tell an exciting story or explain how to do something which involves great activity. They should sit on their hands and not move any other parts of their body. Afterwards discuss the effects on both the listeners and speakers.

25. Have a committee collect pictures from magazines, newspapers and other sources showing physical conditions in urban and suburban areas that make communications difficult. Construct a bulletin board display.

26. Have students visit a cemetery. Write down various types of epitaphs found on the markers. Report to class.

27. Make a grave rubbing of a marker that is of special interest.

28. Have students investigate various quotes on death. Select one and explain what it means to yourself. Write your own quote on death and explain its meaning. May be oral and/or written.

29. Have students write their own obituaries/epitaphs. Then have them relate how they felt about the experience, what they wanted the obituaries or epitaphs to say about them as individuals and why. Also discuss what they would like written about them. What factors could lead to change?

30. Have students make a collage showing life versus death.

31. Class discussion allowing students to express their feelings on a death experience they have encountered.

32. Find a cemetery. Look at tombstones and notice especially the dates on them. Has the material they are made from changed? What has been the effect of time and weather? Have epitaphs changed? Look at the tombstones from the same year. Are there differences in style among them? Did people seem to die at a younger age one hundred years ago? Is there one year that has many deaths? If so, check in City Hall for records of a plague or epidemic. Look at the architecture of large tombs. Can you distinguish differences as in religion, social and economic class, and time from the words and the materials? Who composes the messages on the tombstones? Describe the most typical and most unusual tombstones observed.

33. Find a cemetery. Who visits it? What do people do in a cemetery when they visit? Is the cemetery only open at certain times? Is there much vandalism?

34. Investigate the economics of death. How much does death cost? How do you buy a plot and who buys one? For how much? Can you get into a cemetery without a reservation? Are there laws against discrimination? Are there such things as public and private cemeteries? How is a body shipped? Do you have to be a United States citizen to be buried here? What laws govern the digging up of a body? Is there insurance to cover burial costs or can it be covered and paid for by a will?

35. Investigate writing a real or imaginary will. What types of things do you want covered? Will these change with time? How? Why?

36. Discuss: What do you say to the members of a deceased's family? Are some words and gestures more comforting and reassuring than others? Why? Is there a difference in what you say depending upon the circumstances surrounding the death?

37. Have students rank order and then discuss: Which of the following has had the most influence on your life?
    - Environment while growing up
    - God or some other supernatural force
    - Luck
    - Characteristics with which born (heredity)
    - What people in power (authority) decided
    - Own will power
    - New insights about self

38. Oral report on the private feelings of one of the following situations in which the student would be most likely to feel wonder, awe, and appreciation:
    - Moon shot
    - Mass meeting
    - After completing a difficult task
    - Becoming a parent
    - On a mountain top
    - Looking at a stormy sea
    - Prayer or religious service
    - When listening to great music or looking at great art

39. Role-playing: Imagine that you were walking along through a park in bright daylight and suddenly from behind some bushes someone screams, "Help, help, he's trying to kill me!" In such a situation, what do you honestly think you would do? (Keep walking; run; start looking for a policeman or a phone booth to call the police; look behind the bushes and see if you could be of any help; etc.). Discuss.

40. Discuss: Although it's hard to say what you will actually do in certain sutations, does each of the following sound like something you feel you might do or something you definitely wouldn't do:
    Tell somebody off if he tried to crowd in front of you while you were in line.
    Say you were sick when you really weren't in order to get an extra day off.
    Admire someone who was trying to stop communism from spreading in the United States.
    Approve of a parent slapping his or her child for getting mad and screaming.
    Buy a radio or TV from someone who had stolen it and was selling it cheap.
    Try some herbs that were said to make you feel healthier.

41. Student poll: Which of the following do you favor? Not favor? Discuss results of the poll.
    Giving the police more power.
    More money spent on exploring outer space.
    New laws and taxes making it impossible for anyone to become extremely wealthy.
    Legalizing marijuana.
    An unmarried couple living together.
    More freedom for homosexuals.

42. A great deal can be learned about emotional behavior from role-playing situations. A group of students can write a short skit to show how friction can develop between two friends. They might use a situation in which a decision made by one is rejected by the other. If the skit ends with the two friends angrily walking away from each other, members of the class can then suggest ways in which the conflict might have been resolved and the friendship saved. This same technique can be used with a conflict plot, i.e. teenager and parent, teenager and teacher.

RESOURCES

Books:

The Controllers, Jim Cole: Shields Publishing Company, 1971. 150 C

Deciding, H.B. Gelatt, et al; College Entrance Examination Board, 1973. 371.4 G

Decisions and Outcomes, H.B. Gelatt, et al; College Entrance Examination Board, 1973. 371.3 G

The Facade, Jim Cole; Shields Publishing Company, 1970. 150 C

Health: A Quality of Life, John Sinacore; MacMillan Company

Health for Effective Living, John, Sutton, Webster; McGraw-Hill Company

The Helpers, Jim Cole, Shields Publishing Company, 1973. 150 C

Juxtaposition, James Burl Hogins and Gerald A. Bryant, Jr.; Science Research Associates, Inc., 1971. 149 H

Manual of Death Education, Ernest Morgan; The Celo Press, Route 5, Brunsville, North Carolina 28714. 398.3 M

Modern Health, Otto, Julian, Tether; Holt, Rinehart and Winston

Tune Into Health, Telice and Carolan, College Entrance Book Company

Values Clarification, Sidney B. Simon, et al; Hart Publishing Company, 1972. 371.3 S

Why Do We Jump To Conclusions, Sanford I. Berman; International Society for General Semantics, 1962. 149 B

Films:

Adventures of an Asterisk, BOCES #831-199, 10 minutes

A Sense of Purpose, BOCES #832-220, 16 minutes

Black and White, BOCES (video cassette), 4 minutes

Black Rabbits and the White Rabbits, The, BOCES (video cassette), 8 minutes

Crowd, The, BOCES #842-33, 20 minutes

Crunch, Crunch, BOCES (video cassette), 9 minutes

Fine Art of Aggression, BOCES #832-212, 16 minutes

Frank Film, BOCES #831-366, 9 minutes

Freud: Hidden Nature of Man, BOCES #833-61, 29 minutes

Frustration/Aggression: It's Not Fair, BOCES #832-367, 13 minutes

Garden Party, BOCES #833-119, 24 minutes

How to Say "NO" To A Rapist...And Survive, Part I - BOCES #833-150, 26 minutes, Part II - BOCES #833-151, 26 minutes

I Just Don't Dig Him, BOCES #831-212, 12 minutes

I Who Am, Who Am I, BOCES #832-213, 16 minutes

Loneliness and Loving, BOCES #832-214, 16 minutes

Love to Kill, BOCES #832-215, 16 minutes

Papa, You're Crazy, BOCES #832-268, 18 minutes

Parent/Child Relations: It's My Decision As Long As It's What You Want, BOCES #832-325, 12 minutes

Parting, The, BOCES #832-326, 16 minutes

Perfect Race, BOCES #832-347, 20 minutes

Replay, BOCES #831-349, 8 minutes

Right To Live: Who Decides, BOCES #832-219, 16 minutes

Self Identity/Sex Roles, BOCES #832-423, 12 minutes

Separation/Divorce: It Has Nothing To Do With You, BOCES #832-340, 12 minutes

Films: (Con't.)

Soon There Will Be No More Me, BOCES #831-333, 10 minutes

String Bean, The, BOCES #832-271, 17 minutes

Suicide: But Jack Was A Good Driver, BOCES #832-336, 12 minutes

That's Me, BOCES #842-45, 15 minutes

Therapy: What Do You Want Me To Say?, BOCES #832-348, 14 minutes

Though I Walk Through the Valley, BOCES (video cassette), 30 minutes

To See Or Not To See, BOCES #832-339, 15 minutes

Understanding Stresses and Strains, BOCES #831-190, 10 minutes

Upturned Face, BOCES #831-336, 10 minutes

Violence Just For Fun, BOCES #832-223, 16 minutes

Walls and Windows, BOCES #832-341, 13 minutes

When Parents Grow Old, BOCES #832-224, 16 minutes

Whether To Tell The Truth, BOCES #832-224, 16 minutes

Will To Win, BOCES (video cassette), 27 minutes

You See, I've Had a Life, BOCES #842-52, 32 minutes

Kits:

Effective Communications, BOCES #123-4

Interpersonal Communications, BOCES #123-15

Perspectives On Death, BOCES #392-10
- Death Through the Artist's Eyes, (filmstrip and cassette)
- Funeral Customs Around the World, (filmstrip and cassette)
- Death Themes in Literature, (cassette)
- Death Themes in Music, (cassette)
- Anthology of Readings
- Student Manual

Posters Without Words, BOCES #123-16

Search for Meaning, BOCES #123-12, (Values Clarification Activities)

Search for Values, BOCES #123-13, (Values Clarification Activities)

Valuing: Exploration and Discovery, BOCES #123-1

Pamphlets:

Inside Out: A Guide for Teachers, BOCES #P-101

Mental Health, BOCES #P-83

Suicide: The Will To Die, BOCES #P-81

Games:

Body Talk, BOCES #110-25

Can of Squirms, (Teenage), BOCES #110-16

Can of Squirms, (Adult), BOCES #110-33

Can of Squirms, (College), BOCES #110-34

Feelin', BOCES #123-4

Feel Wheel, BOCES #110-28

Generation Rap, BOCES #110-13

Hang-Up, BOCES #110-10

Society Today, BOCES #110-26

The Ungame - Tell It Like It Is, BOCES #110-29

You!, BOCES #110-23

Why Am I Afraid To Tell You Who I Am?, BOCES #110-12

HEN:

Mental Health Materials, BOCES #HN-18

Materials listed below are available from the Special Education Instructional Materials Center (SEIMC) and may be borrowed by sending the publication's name and/or author(s) to the Special Education Office. Please include call number when possible. Many of these make excellent sources to which parents may be referred by teachers.

"A Child Called Noah" by Josh Greenfeld, reprinted by Higgins-McArthur, Longino & Parter Inc. and distributed by National Society for Autistic Children, Inc.

"A New Look at Childhood Autism Points to CNS Disease" by Dr. Ritrio, Changing Concepts, 1969.

A Parents Guide to Learning Problems by Margaret Golick, published by Quebec Association for Children with Learning Disabilities.

"Behavior Modification of An Autistic Child" by Eleanor R. Brawley, Florence R. Harris, K. Eileen Allen, Robert B. Fleming, and Robert F. Peterson, Mental Health Digest, 1969.

The Brain Injured Adolescent by Sol Gordon, Ph.D. from New York Association for Brain Injured Children, 1973.

The Brain Injured Child from the Association for Brain Injured Children.

The Brain Injured Child - Cerebral Damage by Ruth Morris Bakwin, M.D., reprinted by New York Association for Brain Injured Children.

The "Brain Injured" Child - Introduction to Learning Disabilities by Dr. Lawrence Taft, printed by New York Association for Brain Injured Children.

The Brain Injured Child (The Perceptually Handicapped) by Richard S. Lewis from the National Easter Seal Society for Crippled Children and Adults.

"Counseling the Parent of the Brain-Damaged Child" by Dr. Bazach from Journal of Rehabilitation, 1971.

"Good Gosh! My Child Has Dyslexia" by S.V. Dauzat, Reading Teacher, V 22, N7, page 630-33, April 1969.

Helping the Adolescent with the Hidden Handicap; Edited by Lauriel E. Anderson.

"Individual Learning Disabilities", Frostig, Marianne & Others, Rocky Mountain Educational Lab Corp., Denver. Spons. Agency-Office of Education (DHEW), Washington, D.C., October, 1968. Page 43 ED029 418.

"Is There a Tornado in the House" by Sally Olds from Today's Health, 1969.

"The Last Child" by Ellen Lochaya.

"Learning Disabilities - A Complex Phenomenon", J.C. Abrams, Reading Teacher, 23:299-303, 367, January 1970.

"Meeting Total Needs of Learning Disabled Children" from the Ontario Association for Children with Learning Disabilities.

"Neurologically Handicapped Child: From, One Parent to Another" by Marilyn R. Coe from California Association for Neurologically Handicapped Children.

New York Association for Brain Injured Children News, Volume 13, No. 3.

The School Day of the Learning Disabled Child by Willetta Iilva. A resource booklet with information for parents of learning disabled children.

"She Thought I Was Dumb, but I Told Her I Had a...Learning Disability" by Margaret Golick.

Some Aspects of the Characterisitics, Management and Education of the Child with Learning Disabilities (Minimal Brain Dysfunction) by Sam D. Clements, Ph.D., published by Arkansas Association for Children with Learning Disabilities Inc., 1969.

They Too Can Succeed by Doreen Kronick. A practical guide for parents of learning disabled children.

Who Is This Child? by Eileen F. Lehman and Robert E. Hall.

Your Child Has A Learning Disability...What Is It? by Beverly S. Williams. A Guide for Parents and Teachers with a Hidden Handicap, from the National Easter Seal Society for Crippled Children and Adults. 1971.

The following are some addresses to which you may wish to write if you have any questions or want additional information:

Association for Children with Learning Disabilities, Inc.
5225 Grace Street
Pittsburgh, Pennsylvania 15236

New York Association for Brain Injured Children
95 Madison Avenue
New York, New York 10016

Mental Health Materials Center
419 Park Avenue S.
New York, New York 10016

Center for Multiple Handicapped Children
105 East 106th Street
New York, New York 10029

American Schizophrenia Association
56 West 45th Street
New York, New York 10036

National Society for Autistic Children
621 Central Avenue
Albany, New York 12206

The Council for Exceptional Children
1920 Association Drive
Reston, Virginia 22091

FAMILY LIFE

OVERVIEW

This unit not only includes activities that can lead to a knowledge of physiological and psychosexual facts of reproduction, but also includes activities that can help students tc develop positive understanding of self, a mature adulthood and a happy family life. Further, this unit is intended to satisfy the students' desires to understand the biological man and to develop some knowledge of acceptable social and sexual behavior.

These may be difficult topics for the teacher to deal with in the classroom. They are surrounded by strong emotions which are the result of the ethics and mores imposed by religion, subculture and family as well as one's own experience. It takes courage to confront these emotions directly; and, therefore, it is the opinion of the editor that if any of the topics in this unit are too uncomfortable for the teacher to discuss, he or she should seek out other professionals who can work with him in order to make some meaningful presentation possible.

It is essential that time and effort be given to the topics which directly affect family life during a handicapped pupil's education, and, preferably, that they be repeated at intervals with the increased information and level of sophistication commensurate with the pupil's development.

Today we are aware of the value of imparting to young people factual information as well as positive feelings about human sexuality which are appropriate to their interest and ability to understand. In this area of health education, as in many others, the teacher's attitudes and actions often speak louder than words.

OBJECTIVES

Suggested Pupil Outcomes:

1. Acquire a knowledge for understanding and the attitudes for accepting roles and responsibilities as a family member.

2. Have an understanding of the interrelationships of the family, cultural influences, and the individual.

3. Seek greater self-realization and happiness through family relationships.

4. Express the significant role the family cycle plays in the development of attitudes, standards, and values.

5. Explain that life comes from life.

6. Explain the rudiments of reproduction.

7. Describe reproduction in plant life.

8. Describe reproduction in animal life.

9. Describe normal incidents of growth and development.

10. Identify the individual differences within the male sex.

11. Identify the individual differences within the female sex.

12. Compare the physical differences between males and females.

13. Acquire a scientific background of the male and female reproductive organs.

14. Analyze the psychological and physiological changes which are taking place in one's body and how each individual's maturation rate varies.

15. Understand that biological sexuality is only one phase of total maturity.

16. Express an awareness of the relationship between sexuality and physical and emotional behavior.

17. Discuss with dignity and without embarrassment the problems of growing up sexually.

18. View one's sexuality with maturity commensurate with one's age.

19. Assume one's sex role and develop high ideals for one's adulthood and future family.

20. Establish a wholesome attitude toward sex.

21. Understand the interrelationships of heredity and environment and utilize this knowledge in forming attitudes and behavior.

22. Explain conception, pre-natal development and the process of birth.

23. Investigate the theories of causation of homosexuality and lesbianism.

24. Investigate various dating patterns and means of mate selection.

25. Analyze responsibilities and privileges involved in a marriage relationship and family planning.

MAJOR CONCEPTS

1. Parents, grandparents and remote ancestors contribute to a person's characteristics. There are male and female humans, just as there are male and female forms in plant and animal life.

2. Each individual is a unique biological pattern caused by heredity and environment.

3. Good behavior is a part of growing up. Improving behavior tells others you are growing up.

4. Each of us assumes various roles and responsibilities as a member of a family.

5. Adults help children to stay safe, happy, healthy, clothed, fed, and secure.

6. Families do many things together.

7. Each individual, as a person, is very important to the family.

8. Early childhood education is a family responsibility.

9. Individual actions and well-being can contribute or detract from the well-being of the family.

10. The family satifies the personal needs, aspirations, desires, and drives of the individuals who make up the family.

11. Our society has special ceremonies and laws to make the change from courtship to married life.

12. Beginning families need to establish ground rules for routine married life.

13. A good marital sexual relationship is the product of mutual understanding and adjustment.

14. Knowledge and appreciation of conception, embryological development, pre-natal and post-natal care and problems, and the birth process is a responsibility shared by both parents.

15. The family is the only socially approved agency of reproduction. There are various alternatives for handling a suspected premarital pregnancy.

16. Pregnancy and childbirth are natural events of human life.

17. Related living organisms reproduce in similar ways.

18. There are many anatomical and physiological differences between the human male and female.

19. Many significant changes take place during puberty.

20. The menstrual cycle is a natural event in the life of a young girl which indicates she has reached one new level of maturity.

21. Masturbatory experiences may follow genital handling upon reaching maturity.

22. Human sexuality, which involves our growth and development, as well as the complex drives associated with love and marriage, is the basis for many facets of our behavior.

23. The human fetus develops in a unique manner; normal birth occurs when the fetus is developed sufficiently to survive.

24. There are various types and stages of love.

25. Personal decisions concerning sexual conduct are intimate, individual decisions, unique in time, place and the personalities involved.

26. The responsibility and privileges in dating during the transition from adolescence to adulthood allow boys and girls to develop understanding of each other.

27. Mature judgment concerning dating can lead to a good choice in marriage partners.

28. Selecting a marriage partner is one of life's most important choices.

29. Intelligent study of divorce can result in development of desirable attitudes and understandings necessary for an effective marriage relationship.

30. Today, fathers often share in the joy of actively participating in the birth of their children.

31. For various reasons, some individuals are able to achieve more meaningful relationships with members of the same sex rather than with members of the opposite sex.

CONTENT OUTLINE

I. Maturation
   A. Physical changes
      1. Female: external changes
         a. Breast development
         b. Pelvic change
         c. Development of pubic and axillary hair
      2. Male: external changes
         a. Voice changes
         b. Development of beard
         c. Enlargement of sexual organs
         d. Development of pubic and axillary hair
      3. Female: internal changes
         a. Menstrual cycle
         b. Endocrine balance
   B. Emotional changes
      1. New urges and feelings
      2. Emotional responses
         a. Peer relationships
         b. Dating relationships
      3. Value and interest change
      4. Awareness of identity

II. Human Reproduction
   A. Male reproductive system
      1. Structure and functions
      2. Male hormones
   B. Female reproductive system
      1. Structure and functions
      2. Female hormones

III. Fetal Development
   A. Fertilization
   B. Stages of development
   C. Birth

IV. Responsibilities
   A. Influential factors in dating behavior
      1. Family influence
      2. Peer pressure
      3. Mass media
   B. Disadvantages of early dating
      1. Limits emotional growth
      2. Curtails relationships with others
   C. Dating considerations
      1. Asking for a date
      2. Accepting or rejecting a date
      3. Going steady
         a. Advantages
         b. Disadvantages
   D. Dating behavior
      1. Kissing
      2. Making love
      3. Sexual intercourse
         a. Emotional implications
         b. Social implications

V. What to Look for in a Marriage Partner
   A. Maturity: physical and emotional
   B. Good personality
   C. Economic responsibility
   D. Familial responsibility
   E. Counseling (Premarriage)

VI. Responsibilities of the Family Members to
   A. The individual
   B. Each other
   C. Children born of the union
   D. Significant others
      1. A new baby
      2. Adopted child
      3. A new parent image
      4. Grandparent living with family

VII. Family Planning
   A. Conception
   B. Contraception
   C. Pre-natal development and birth of a baby
      1. Physical process
      2. Psychological considerations

VIII. Problems Related to Sexuality
   A. Venereal disease
   B. Premarital pregnancy
   C. Homosexuality/Lesbianism
   D. Birth defects
   E. Frigidity
   F. Impotence

IX. Current Issues
   A. Abortion
   B. Homosexuality
   C. Transsexualism
   D. Transvestism
   E. Separation and divorce
   F. Adoption
   G. Criminal sex offenses
      1. Child molesting
      2. Rape
      3. Prostitution
   H. Communal living
   I. Common-law marriages
   J. Double Standard
   K. Sexual values in society and the individual's responsibility

1. Discuss the physical changes from boy to man and girl to woman.

2. Discuss the need of proper body care and good grooming: sleep, exercise, proper diet, personal hygiene, etc.

3. Discuss awkwardness and lack of coordination as a characteristic of this age group.

4. Discuss the condition of acne and the importance of good skin care.

5. In small groups have students discuss the differences and similarities in the way males and females express sadness, fear, affection, etc. Why?

6. Discuss the different reactions boys and girls experience from love stories, horror movies, etc. Why?

7. Make a list of "What Your Family Expects of You" and compare it with a list of "What Your Friends Expect of You", i.e. telephone use, hair stlye, dress code, curfew hours, etc.

8. Ask the students to give illustrations of how their parents showed love and affection to them from early childhood to the present. Ask the students how they returned this love and affection.

9. Discuss the differences between love and infatuation.

10. As we all know, it is important for teenagers and their parents to communicate. This is a simple and interesting way to illustrate to the young people in your classroom the communication gap and some possible solutions. On a piece of paper, have the students write fifteen things which are important to them. When this is completed, draw three columns next to the list. In the first column have the students check the items which they do not discuss with anyone. In the second column, check those which are discussed with friends only. In the third, check off the things which are discussed with their parents. When the list is completed, use this as a jumping off point for classroom discussion.

11. Construct a check-list of traits that you would look for in selecting a spouse. Be prepared to explain why.

12. Divide the class into small groups. Have each report on the purposes of one of the following:

dating	honeymoon
courtship	marriage
engagement	family
wedding	

13. Assign a report on how each of the various factors relates to family planning:

religion	sterility
economics	career
health	age
fertility	

14. Invite a person who has functioned in marriage counseling to speak to the class on the topic of communication in marriage. Have students analyze after.

15. Discuss the characterisitics boys and girls look for in dating partners.

16. Compare the learning one gets from a close friendship with a member of the same sex and from a dating partner.

17. Present a student-parent panel discussion on the present practices of local dating and/or non-dating.

18. Ask the students to develop independent lists on how they would like the other sex to behave in boy-girl relationships. Follow this with an open discussion.

19. Ask the class to list the advantages and disadvantages of "going steady".

20. Devise a collage to show environmental factors which influence our attitudes toward sex (family, peer group, church, television, advertisements).

21. Compare and contrast the advantages and disadvantages of arranged marriages and love-marriages.

22. Debate the topic, "Today Anything Goes - If You Can Get Away With It!"

23. Have selected students compile a report on the costs of marriage: perhaps for a simple civil ceremony, a small church wedding (25 to 50 people), and a larger wedding (100 +). Report to class.

24. Debate: Is marriage necessary?

25. Panel discussion on buying vs. renting a home.

26. Debate: "People fail, not marriages."

27. Have students, using an anatomical graph or chart, explain how conception occurs; how the embryo and fetus develop, and childbirth occurs. (May be done as an individual test.)

28. Invite school nurse to speak on the importance of pre-natal care in the development of a healthy baby.

29. Discuss the advantages of giving birth to a baby in the hospital instead of at home.

30. Debate: "Abortion should be declared illegal."

Books:

Curriculum Guides for Family Life and Sex Education: An Annotated Bibliography, 1973. Order by code: FP#10 @ $1.00 per copy from E.C. Brown Foundation, 1802 Moss Street, Eugene, Oregon 94703

Education for Sexuality, John J. Burt and Linda A. Brower; Philadelphia, W.B. Saunders Company, 1970

Facts About Sex, Sol Gordon; John Day Company, 1973. 612.6 G

Facts Aren't Enough, Marion O. Lerrigo, et al; NEA and American Medical Association, 1962. A very detailed look at the nature and need for sex education is presented in this booklet. It is written for adult use with children preschool through teenage years. Available through SEIMC. PE-0627

From Conception to Birth: The Drama of Life's Beginnings, Robert Rugh; Harper and Row

Love and the Facts of Life, Evelyn Duvall, 1963

Love, Sex and Birth Control, Winifred Kempton, et al; Planned Parenthood Association, 1971 612.6 K

On Being the Parent of a Handicapped Youth, Sol Gordon; New York Association for Brain Injured Children. Available through SEIMC.

Parents Responsibility, Marion O. Lerrigo, et al; NEA and American Medical Association, 1970. Many parents feel hestitant about when and how to discuss sex with their youngsters. This pamphlet helps to guide them by suggesting many ways to handle common questions and situations which arise as youngsters "grow up." Available through SEIMC. PR-0624

Reproduction, Sex, and Preparation for Marriage, Lawrence Crowley, 1973

Survival in Marriage, Gail Putney Fullerton; Holt, Rinehart and Winston, Inc., 1972. 612.6 F

Books: (Con't.)

The "Brain Injured" Adolescent, Sol Gordon, Ph.D.: New York Association for Brain Injured Children, 1973. Available through SEIMC.

Why Marriage?, Edward E. Ford; Argus Communications, 1971. 612.6 F

Films:

About Conception and Contraception, BOCES #831-374, 11 minutes

Adolescent Sexual Conflict: Are We Still Going to the Movies?, BOCES #832-373, 14 minutes

Close Feelings, BOCES #832-17, 11 minutes

First Days of Life, BOCES #832-400, 16 minutes

The Game, BOCES #843-9, 28 minutes

Growing Pains, BOCES #832-297, 13 minutes

Homosexuality: What About McBride, BOCES #832-300, 14 minutes

Have a Healthy Baby, BOCES #832-90, 16 minutes

How To Say "NO" To A Rapist...And Survive, Part I - BOCES #833-150, 26 minutes, Part II - BOCES #833-151, 26 minutes

Human Reproduction, BOCES #832-53, 20 minutes

It Couldn't Happen To Me, BOCES #833-154, 28 minutes

Like Other People, for rental write: Planned Parenthood of Santa Barbara County, Inc., 322 Palm Avenue, Santa Barbara, California 93101

Methods of Family Planning, BOCES #832-180, 18 minutes

Phoebe, BOCES #843-15, 29 minutes

Pamphlets:

ABC's of Birth Control, BOCES #P-96

The Modern Baby, BOCES #P-86

Several pamphlets which may be of resource value to teachers are available from: Ed-U-Press
760 Ostrum Avenue
Syracuse, New York- 13210

HEN:

Family Life Education, BOCES #HN-12

Charts:

Methods of Birth Control, Planned Parenthood of Northern New York, Inc., (Flip chart - diagrams and captions)

Human Reproduction, BOCES #CH-3

Model:

Human Development, BOCES #MO-1

A Resource Guide in Sex Education for the Mentally Retarded, Loewll Klappholz, Editor.
A 1971 revision of joint publication by two above organizations. Editor is editor of Physical Education Newsletter, Croft Educational Services, New London, CT. Offers guidelines for helping mentally retarded children and youth in both residential facility or at home in the community; for programs currently underway or those yet to be started. Urges content be integrated with relevant aspects of exising curriculum; recognizes the variety of potential users of the resource, i.e. teachers, parents, counselors, professionals, para-professionals. Includes a number of valuable additional resources. Curriculum content organized into four categories: awareness of self, physical changes and understanding of self, peer relationships, and responsibility to society. Sample activities for each category. Write: Director, Project on Recreation and Fitness for the Mentally Retarded, AAHPER, 1201 16th Street, N.W., Washington, D.C. 20036 or SIECUS, 1855 Broadway, New York, New York 10023.

Curriculum Guides for Family Life and Sex Education: An Annotated Bibliography, 1973
Order by code: FP#10 @ $1.00 per copy from E.C. Brown Foundation, 1802 Moss Street, Eugene, Oregon 94703.

Curriculum Guide for Human Sexuality, Putman/Westchester BOCES, Yorktown Heights, New York 10698

Education for Sexuality, Burt, John J., and Brower, Linda A., Philadephia: W.B. Saunder Co., 1970

Facts About Sex, Sol Gordon, New York: John Day Co., 1973. 612.6 G

Facts Aren't Enough, Marion O., Lerrigo, et. al., NEA and American Medical Association, 1962. A very detailed look at the nature and need for sex education is presented in this booklet. It is written for adult use with children preschool through teenage years. PE-0627.

Guidelines on Planning a Training Course on human Sexuality and the Retarded, Planned Parenthood Association.

How To Tell the Retarded Girl About Menstruation by Marion Jones. Emphasis is on similarity of physical development of mentally retarded girl and other girls. Simple explanation of menstruation which mother or teacher can use for retarded girl. Simplified illustrations. The Life Cylce Center -- Kimberly Clark Corporation, Neenah, Wisconsin 54956.

Love, Sex and Birth Control for the Mentally Retarded - A Guide for Parents, Planned Parenthood Association of Southeastern Pennsylvania, 1402 Spruce Street, Philadelphia, PA 19102. $.75 each.

Loving and Living II, Rocky Moutain Planned Parenthood, Denver, Colorado

Marriage and Mental Handicap, Janet Matterson; University of Pittsburg Press, 1972

Mental Retardation and Masturbation by Warren R. Johnson, 1967. Originally printed in April, 1967 issue of SEXOLOGY magazine. Author is head of Department of Health Education, University of Maryland. Dispells myths related to masturbation and sexual self-stimulation in retarded and normal children. Outlines several suggestions for those responsible for the behavior of the mentally retarded in helping them achieve emotional and mental maturity. For availability write to SIECUS, 1855 Broadway, New York, New York 10023.

Mental Retardation: A Family Study, E.W. Reed and S.W. Reed, Philadelphia: W.B. Saunders Co., 1965.

"New Directions for the Retarded", Joseph T. Weingold, Journal of Clinical Child Psychology, Vol. II, No I, Winter 1973.

Parents Responsibility, Marion O. Lerrigo, et. al., NEA and American Medical Association, 1970. Many parents feel hesitant about when and how to discuss sex with their youngsters. This pamphlet helps to guide them by suggesting many ways to handle common questions and situations which arise as youngsters "grow up". PR-0624

Publications List on MR Sexuality and Sex Education

SIECUS Publications Office
1855 Broadway
New York, New York 10023

"Sex and the Mentally Retarded", Dr. A.N. Jennings, Rehabilitation In Australia, October 1970.

Sex Education and the Mentally Retarded, H.M. Selznick, Johnston Bull, 5:23, 1962.

Sex Education for the Mentally Retarded by Virginia Young Blackridge, MD, 1969. Discussion for parents who have an educable or trainable retarded child. Simplified information on physical development and sexuality. Emphasizes helping child enjoy living in an unsheltered life as possible commensurate with his intelligence. Discusses birth control, abortion, venereal disease, and homosexuality in relation to mental retardation. Divides material into that suitable for child with mental age of 1-3 years; 3-7 years; 3-10 years. Write: Alameda County Mental Retardation Service, 131 Estudillo Avenue, San Leandro, California 94577.

"Sex Education for the Mentally Retarded: An Analysis of Problems, Programs, and Research", Edward Vockill and Pamm Mattick, Education and Training of the Mentally Retarded, October 1972.

Sex Education Information Inventory for Retarded Adolescent Girls, Karen Vockell, Linda Rosulek, Pamm Mattick, and Edward Vockell. Request from Dr. Edward Vockell, Department of Education, Purdue University, Calumet Campus, Hammond, Indiana 46323. An excellent guide and tool to be used in evaluating and designing a sex education unit for retarded adolescent girls. Includes diagrams, pictures, and inventory complete with written dialogue.

Sexuality and the Mentally Retarded, Karl E. Thaller and Barbara D. Thaller, Office of Economic Opportunity, Washington D.C., 1973. (Extensive report on conference - excellent) $3.00.

"Sexual Problems of the Mentally Retarded", Frank J. Memolascino, Sexual Behavior, November 1972.

Special Education Guide for Teachers; Educable Mentally Retarded Write for information on above to State Schools for Retarded Children, State Department of Education, Division of Public Schools, Jefferson City, MO 65101.

Summary Report of Workshop: Family Life and Sex Education for Teachers of the Mentally Retarded by Edward L. Meyen, 1969. Summarizes workshop in which 42 teachers of mentally retarded considered guidelines for teaching sex education to mentally retarded. Emphasis on individual evaluation of materials, techniques for instruction, not attempt to provide teacher with "cookbook" approach to subject. Helpful guidelines for setting up similar workshops. For availability write to Kansas City Social Health Society, Inc., 406 West 34th St., Suite 412, Kansas City, MO 64111.

Talk on Homosexuality for Penhurst, Winifred Kempton; Planned Parenthood

Teaching Good Conduct and Personal Hygiene to Retarded Teenagers. Write to: Harris County Center for the Retarded, P.O. Box 13403, Houston, Texas 77019. Filmstrip and written guide. Excellent resource.

Techniques for Leading Group Discussion on Human Sexuality, Winifred Kempton; Planned Parenthood

As students reach the age when they can find the concept of "environment" meaningful, the idea of "community" can be presented; because the two are related. The persons within one's immediate environment make up the community in which one lives. Just as it is each person's responsibility to protect his environment, it is also his responsibility to act in such a way that he will not cause harm to the community and indeed that he will contribute to it, if possible. Similarly, he needs to know such basics as we do not throw soft drink cans out of the car window; we do not take things from stores without paying for them; we do not play music loudly late at night which might bother the neighbors; and we do not go to school when we are sick with something that might spread to other people.

There are many things these pupils can do to contribute to the life and health of the community. They can practice good environmental habits individually. They can pick up rubbish in community parks. They can tell their families about recycling. They can ride a bicycle or use public transit instead of always driving or being driven in the family car.

Awareness of environmental issues is the place to start in learning to become a wise consumer. The attitude of "use it once and throw it away" which is promoted by the manufacturers of paper products, toys, and household goods can better be resisted by the young person who understands that this practice contributes to the destruction of the environment.

Consumer, environmental and public health are closely related, and recognizing their interrelationships gives impetus to efforts which can be made to further them.

CONSUMER, ENVIRONMENTAL AND PUBLIC HEALTH

Objectives

1. Understand the interrelationship between man's health and his biological environment.
2. Define terminology pertaining to environmental and public health.
3. List the main sources of pollution in the environment.
4. Relate the community responsibilities for water purification, air purification, and sewage treatment.
5. Express an awareness of the uses and misuses of water, land, and air.
6. Evaluate old myths and cures.
7. Identify the dangers in cancer, arthritis and other quackery devices and procedures.
8. Conclude that comprehensive health care requires effective programming, accessibility to services and quality personnel.
9. Discriminate critically between reliable and unreliable health information and advertising.
10. Avoid the dangers of medical neglect, self-diagnosis and self-treatment.
11. Know how to select and evaluate competent medical, dental, and other health personnel and services.
12. Engage in discussion about population increase and its effect on the environment and the humans within it.
13. Investigate the services of the federal, state and local health departments.
14. Identify and analyze international health problems.
15. Explain the roles of the various international health organizations.
16. Conclude the importance of food standards and other governmental regulations for protecting consumers under federal laws.
17. Analyze major trends in medical care practices.
18. Examine various types of health insurance programs - state, federal and private.
19. Evaluate the use and abuse of nuclear energy.
20. Identify the health problems related to space travel.

CONCEPTS

1. Man depends on the organic and inorganic world around him in order to survive.

2. The environment has a significant effect on individual and community health.

3. Many of the present environmental health problems began hundreds of years in the past.

4. The effects of pollutants on health, whatever their nature, are both direct and indirect.

5. There is a need for the establishment of air quality standards in terms of known and suspected effects on what is necessary for the protection of human health and welfare, agriculture and property.

6. Conservation and control of water and air affect our world community.

7. Medical science is actively engaged in research linking air and water pollution to specific diseases.

8. Science, industry, and the individual need to work together to solve the pollution problem.

9. Nuclear energy can be both beneficial and harmful to man's environment.

10. Communities need cooperative planning to enhance health.

11. The newly governing factor in today's world is its population - its size and distribution.

12. The food supply for metropolitan areas presents an increasing number and variety of public health problems.

13. As man has increasingly triumphed over climate problems, pestilence, and famine, he has created an environment which introduces new hazards to human health.

14. Public Health services help to maintain a healthy community.

15. Personal health and community health are interwoven with world health.

16. Protection and promotion of total health transcends local, state, national, international, and political boundaries.

17. Health problems are best dealt with by appropriate specialists.

18. A person must be able to select qualified and competent medical, dental, and allied health personnel and services.

19. Health products such as food, food additives, cosmetics, drugs, and medications are often selected on the basis of hearsay, emotional feelings, past experiences, social forces and pressures.

20. Exaggerated reports of medical information or false advertising may result in emotionally based desires for products or services.

21. Practices of manufacturers reflect consumer wishes and demands.

22. Reliable sources of health information can help the consumer use established criteria to judge health products and services.

23. The Food and Drug Administration and the Federal Trade Commission are responsible for the safety, effectiveness, and advertising of prescription and over-the-counter drugs.

24. Self-diagnosis and treatment can endanger health.

25. Medical care insurance is of two basic types: voluntary health insurance and compulsory health insurance.

26. Wisely purchased health insurance contributes to individual and family security.

27. There are a variety of forms of Health Services available to families in most areas of the country.

28. Health agencies and legislation help protect the consumer from fraudulent and harmful products and services.

29. Organizations, agencies and laws are society's methods of protecting the health of the individual and the community.

CONSUMER, ENVIRONMENT AND PUBLIC HEALTH

Content

I. Components of Man's Environment
   A. Physical factors
      1. Water
      2. Soil
      3. Air
      4. Climate
   B. Biological factors
      1. Harmful and beneficial plants
      2. Harmful and beneficial animals

II. Relationship of Man's Health to His Environment
   A. Air
      1. Necessity for oxygen
      2. Disposal of carbon dioxide
      3. Pollutants
         a. Factories
         b. Transportation
         c. Pesticides
         d. Power plants
         e. Open dumps
   B. Water
      1. Pure water for cellular use
      2. Water containing pathogens
      3. Pollutants
         a. Industrial
         b. Sewage
         c. Detergents
         d. Insecticides
         e. Motor boats
   C. Soil
      1. Uncontaminated for good growth
      2. Soil containing pathogens
      3. Urbanization taking needed soil areas
      4. Contamination by pesticides
   D. Climate Extremes
      1. Diseases associated with high climate temperatures
      2. Diseases associated with low climate temperatures
   E. Radiation
      1. Harmful effects
         a. Fall-out
         b. Disease/disorders
         c. Chromosomal mutations
         d. Destruction of large land areas
      2. Beneficial effects
         a. Electrical energy
         b. Submarines
         c. Air transportation

F. Noise
G. Sewage
H. Garbage and refuse
I. Chemicals
    1. Lead
    2. Mercury
    3. Pesticides
    4. Others
J. Housing

III. Agencies Used to Keep a Community Healthy
- A. Board of Health
  1. Communicable disease control
  2. Vital statistics
  3. Sewage disposal
  4. Garbage disposal
  5. Milk and water control
- B. State Department
  1. Air pollution
  2. Stream pollution
  3. Industrial waste control
  4. Enforcement of sanitary laws
- C. Federal Agencies
  1. Department of Health, Education, and Welfare
  2. Department of Agriculture

IV. Space Age Travel and Health
- A. Difference between space and atmosphere
- B. Major health problems involved in space travel
  1. Supplying oxygen for respiration
  2. Removing excess carbon dioxide (CO_2) and water vapor
  3. Providing food and water for nutrition and body processes
  4. Removing liquid and solid body wastes
  5. Dealing with weightlessness
  6. Maintaining proper temperature range
  7. Preventing bodily damage from extremes in pressure during accelerations and decelerations
  8. Preventing exposure to harmful radiations
  9. Keeping proper atmospheric pressure conditions to permit normal body functions
  10. Overcoming psychological obstacles - loneliness, altered day-night cycles, boredom, stress, new eat-work-sleep cycles
  11. Keeping noise and vibrations from reaching harmful levels
  12. Lack of physical exercise
  13. Vision problems
  14. Traffic problems or accidents in space
  15. Possible harmful organisms
- C. Contributions of the space program to medicine and man

V. World Health History
- A. A look at the past
- B. Bright hopes for the future

VI. World Health Problems
- A. Population
  1. Nutrition
  2. Housing
  3. Medical services
  4. Low income
  5. Illiteracy
- B. Environment
  1. Air
  2. Water
  3. Soil

C. Disease
    1. Communicable
    2. Non-communicable
    3. Degenerative
D. Natural Disasters
    1. Floods
    2. Earthquakes
    3. Hurricanes and various storms

VII. International Organizations
A. W.H.O.
    1. Membership
    2. Purpose
    3. Function
    4. Financing
B. Pan-American Health Organization
C. UNESCO (United Nations Economic, Social and Cultural Organization)
D. UNICEF (United Nations International Children's Emergency Fund)

CONSUMER, ENVIRONMENTAL AND PUBLIC HEALTH

Activities

1. Discuss how technological advances may further upset our ecology.
2. Make a bulletin board showing how man interacts with his environment.
3. Discuss the effects of no water, air, food on society.
4. Make models showing an unpolluted water supply and a polluted water supply.
5. Take a field trip to discover how many industries are polluting the atmosphere.
6. Have the students research air pollution in Cortland County.
7. Discuss pollution of the Tioughnioga River and the effect the new sewage treatment facility will have.
8. Invite a public health official to explain how the agency protects the individual in environmental health.
9. Discuss the various ways that the effect of temperature affects man's health.
10. Borrow a geiger counter from the science department and have students check out radiation in the classroom, labs, any black light source, and T.V.
11. Develop in the students an interest in recycling of materials.
12. Examine specimens from streams and ponds in the area in order to see the number of organisms that grow in the water.
13. Make a word collage for the bulletin board related to a clean environment.
14. Have the class prepare a "running check list" of all the various environmental factors that affect health.
15. Construct a bulletin board display using pictures to illustrate the common sources of air pollution (water, noise, etc. may also be used). Key the pictures to phrases which explain each cause.
16. Have a class group visit a water treatment plant and report their findings to the class. They should consider: methods of treating water to make it safe for human consumption; additives in water not directly related to its purity, and possible problems to be faced in the future for providing fresh water.
17. Have students with interest in photography take photos of various familiar sites of pollution around the community. Make a bulletin board display. Have other class members attempt to identify the sources and develop what they feel to be practical and feasible solutions.

18. Visit local sewage treatment plant. Note size of community it serves; type of treatment performed; adequacy of treatment; disposal end-products; governmental regulations, and any specific problems.

19. Analyze advertisements for "sense appeal". Determine which sense the advertisement is directed toward; what claims are made; how realistic the claims are, and whether the advertising message is direct or implied.

20. Bring an empty over-the-counter drug bottle to class and an advertisement for this product. Read the wording on the box or label carefully to the class. Ask the following questions:
    What precautions are suggested?
    Are possible side-effects mentioned?
    Is there an indication that the drug could be poisonous? If so, is an antidote specified?
    Now read the ad to the class. Are side-effects, precautions, or possible poisonous properties mentioned?

21. On a poster board, make a copy of a label from a prescription drug. Use this display to discuss the usefulness of a prescription. You may find that many of the young people in your classroom do not understand the purpose of all the items on the label or why it is important to take the drug in its entirety at the times which were directed by the doctor unless side-effects occur.

22. Many health products are advertised seasonally and in certain types of media. Using ads from magazines, prepare a display of these ads. Group the ads in such a way that the viewer can recognize the seasonal nature of the ad, as well as the age group for whom the product is intended. For example: nose drops and cough remedies in the winter and suntan lotions in the summer.

23. Is there a difference in the techniques used by tobacco advertising agencies and the ones used by liquor advertising agencies? Using pictures from magazines and newspapers, compare the advertising techniques of these two agencies.

24. Discuss emotional influence of advertising (TV, magazines, etc.) on consumer health purchasing.

25. Discuss the role of education, socio-economic link, peer group influence, and effects of advertising on consumer buying habits.

26. Have students select a specific health problem, i.e. overweight, skin problem, dandruff; discuss how they seek health information, select a doctor.

27. Discuss: "What is the difference between information gained from parents and friends; television, radio; newspaper and magazine; from scientific sources and from other non or pseudo-scientific sources. Evaluate knowledge imparted and motives involved.

28. Discuss the social, emotional and economic reasons why people go to quacks. Include such areas of quackery as food, drugs, gadgets, etc.

29. Discuss the statement: "He who has himself for a physician, has a fool for a patient."

30. Review the sources from which you can obtain reliable unbiased health information as - own physician, local medical society, Better Business Bureau, American Medical Association, Federal Food and Drug Administration, etc.

31. Review safety precautions in taking medicine, also safety precautions to be taken with medications in the home. Include the importance of reporting unusual reactions of persons to medications prescribed by a physician.

32. Investigate the use of statistical statements in advertising. Ask questions. Who says so? How does he know? What's missing? Does it all make sense?

33. Discuss the dangers of ignoring illness and unusual symptoms, and the importance of giving accurate information of all symptoms to a physician.

34. Assume you are moving to a new community with your family. Describe the procedure you would follow in choosing medical and dental care advisors. Include: When should you institute this search? What sources of information would you use to make your decision?

35. Discuss criteria for identifying a health quack. Discuss where and how to report illegal and unethical practices.

36. Develop a list of health services that are available in the local community.

37. Organize a field trip to or invite speakers from hospitals, clinics, other sources or organizations.

38. How can an individual evaluate and select an insurance coverage program? Use outside speakers, i.e. local medical society, insurance agencies.

39. Interview several adults; inquire as to TYPE of medical care insurance coverage they have and the underlying reasons for selection of the particular type.

40. Organize field trips to interview individuals in various professions and occupations; report back to class.

41. Develop showcase displays on health careers for School Career Day or for National Career Week.

42. Collect pamphlets and other materials on all fields which relate to health. Investigate funds, grants, and scholarships in health careers.

43. Role-play: A nutrition expert from the W.H.O. staff tries to convince a village woman that if she will cook her vegetables instead of serving them raw, she can protect her family against some diseases associated with improper preparation. Language is no barrier, but the village woman knows nothing of diseases she can't see. Each player should then tell how he felt about his role, and then the entire class can react to the entire role-playing situation.

44. Using a large world map, locate areas of major world health problems. Use color-coded pins to mark these areas. Information may be gained from publications of the World Health Organization.

CONSUMER, ENVIRONMENTAL AND PUBLIC HEALTH

Resources

BOOKS:

Careers in the Health Field, Lee, Messner Publishing, 1973

Chinese Acupuncture, Dr. Wee Wei Ping, 1973

Consumer Concerns, The University of the State of New York, The State Education Department, Bureau of Secondary Curriculum Development, Albany, New York 1-2224

Devils, Drugs and Doctors, Howard Haggard, 1946

Earth Medicine - Earth Foods, Michael A. Weiner, 1972

Environmental Education: Instructional Activities, New York State Education Department

Environmental Health, P. Walton Purdom, Academic Press, New York

Fraud, E. J. Kahn, Jr., 1973

The Great Patent Medicine Era, Adaline Heckplinger, 1970

The Golden Age of Quackery, Stewart Holbrook, 1959

Health: A Quality of Life, John Sinacore, MacMillan Company

The Hidden Persuaders, Vance Packard, David McKay Co., Inc., 1957

The Indian Folk Medicine Guide, J. I. Lighthall

Magic, Myth and Medicine, Donal T. Atkinson; Greenwich, Connecticut, Fawcett Company, 1956

Medicines From the Sea, James R. Berry, 1972

The Medicine Show, Editors of Consumer Reports, Mt. Vernon, New York, Simon and Schuster, 1971

The Miracle of Health, Rene J. Dubos, New York, Doubleday, 1959

Modern Health, Otto, Julian, Tether; Holt, Rinehart & Winston

The Nuts Among the Berries, Ronald M. Deursch, New York; Ballatine Books, 1961

Remedies and Rockets, James Cook, New York, Warton, 1958

The Silent Spring, Rachel Carson

Tune Into Health, Felice and Carolan, College Entrance Book Company

Two Hundred Million Guinea Pigs; New Dangers In Everyday Foods, Drugs, and Cosmetics, John G. Fuller, 1972

FILMS:

Acupuncture, An Exploration, BOCES #832-280, 16 minutes

Advertising: Information, Persuasion or Deception, BOCES #832-273, 12 minutes

Air Is For Breathing,Shell Oil Company, Color, Free Loan

Automania 2000, BOCES #831-210, 10 minutes

Boomsville, BOCES #831-209, 11 minutes

Brand Names and Labeling Games, BOCES #831-358, 9 minutes

Cities in Crisis, BOCES #832-80, 21 minutes

Consumer Education: Budgeting, BOCES #832-132, 12 minutes

Consumer Education: Installment Buying, BOCES #832-133, 13 minutes

Consumer Education: Retail Credit, BOCES #831-154, 11 minutes

Consumerism: Let the Seller Beware, BOCES #832-234, 22 minutes

Consumer Power: Advertising, BOCES #832-183-22 minutes

Controversy Over Industrial Pollution, BOCES (video cassette), 17 minutes

Cry of the Marsh, BOCES #832-237, 12 minutes

Dehumanizing City, BOCES #832-211, 16 minutes

Ecology: Checks and Balances, BOCES #832-249, 14 minutes

The Great American Trash Can, American Glass Container Company, Free Loan

Harold and Cynthia, BOCES #831-348, 9 minutes

Intern: Long Year, BOCES (video cassette), 20 minutes

Is A Career In Health Services For You, BOCES #832-309, 14 minutes

Is A Career in the Professions for You?, BOCES #832-312, 16 minutes

Journey into Darkness, BOCES #833-116, 30 minutes

Label Logic, BOCES #832-40, 18 minutes

Noise: Polluting the Environment, BOCES (video cassette), 16 minutes

Peace and Voices In the Wilderness, BOCES #831-235, 9 minutes

Rescue Squad, BOCES (video cassette), 14 minutes

There is a Law Against It, BOCES #831-350, 8 minutes

This is Fraud, BOCES #831-351, 9 minutes

Two Yosemites, BOCES #831-179, 10 minutes

1985, BOCES #832-138, 832-139, 832-140, 56 minutes, 3 reels

KIT:

Persuasion Box, BOCES #123-27

FILMSTRIPS & CASSETTES:

Commitment, filmstrip and record, International Paper Company, Free Loan

Man's Natural Environment: Crisis Thru Abuse, BOCES #333-95, 26 minutes
two filmstrips and two records

Teaching About Advertising, BOCES #392-20

PAMPHLETS:

Chamber of Commerce

Co-operative Extension

Insurance Companies

The Blue Cross Story, BOCES #P-80

The Hospital People, BOCES #P-82

The Job You Want, BOCES #P-106

GAMES:

Balance, BOCES #110-19

Baldicer, BOCES #110-7 (Feeding the world's population)

Conflict, BOCES #110-17

Consumer, BOCES #110-3

Earth Resources Monitoring From Space, BOCES #110-32

Planet Management Game, BOCES #110-9

Pollution, BOCES #110-8

Star Power, BOCES #110-18

HENS:

Consumer Education Materials, BOCES #HN-6

Health Careers Information, BOCES #HN-16

OTHER SOURCES:

New York State Conservation Department

Niagara Mohawk Power Corporation

SAFETY AND FIRST AID

OVERVIEW

Knowledge about what one is doing, whether is is how to do something or the limitations of an action or equipment, enters into accident prevention. Attitudes, some of which are not obvious, guide behavior and lead one into or away from hazardous situations. Young people need to become aware of the activities associated with safe and unsafe living. The challenge to the teachers is to provide experiences which will be both meaningful and continuous.

The ability to work with one's hands is important indeed. It should be an area of emphasis for the learning disabled as preparation for later, more specific, vocational training. Using the hands for learning is a good way to supplement the visual and auditory modes for the pupil with learning disabilities. Direct involvement in the environment through manual work can be therapeutic for the emotionally disturbed child.

So safety measures and first aid in case of accidents are important to consider too, in order to make the experience of manual work as worthwhile as possible.

Leadership for safety education must originate within the school through direct and indirect experiences. Indirect experiences come through living in a safe environment, both at work and in play. Direct experiences come through class instruction in safety and participation in communicating the rules of safety to others. Safety must be an integral part of any curriculum which stresses direct involvement in a prevention-oriented environment.

Knowledge of basic first aid techniques is a personal responsibility that each individual owes to himself/herself and to those around him/her. In case of an emergency, the first aider can be an invaluable aid to medical personnel in preventing permanent disability, easing pain and suffering, and even saving lives.

OBJECTIVES

Suggested Pupil Outcomes:

1. Identify unsafe situations and learn to avoid them.
2. Identify common safety hazards in one's home, school and community.
3. Practice behavioral traits which will enhance the safety of oneself and others.

4. Define specific roles of the people directly related to the promotion of safety in the school and community.

5. Identify areas of risk to individual and group safety that might occur specifically during holiday time.

6. Identity areas of risk to individual and group safety that might occur during a particular season of the year.

7. Define some hazards to the pedestrian, the bicyclist, the bus passenger, and the automobile passenger.

8. Describe the major responsibilities of being a pedestrian, a bicyclist, and a bus or automobile passenger.

9. Define a selected number of school safety rules.

10. Contribute toward the development of a safe school environment.

11. Identify the hazards that relate to various daily activities.

12. Illustrate relationships between human behavior and accidents.

13. Relate precautions taken to the reduction of hazards and accidents.

14. Demonstrate selected ways of preventing accidents to individuals, families, and community members.

15. Outline basic first aid procedures which help in saving lives and minimizing injury.

16. Practice standard first aid procedures.

17. Understand and express the idea that accidents are caused by human and environmental factors.

18. Recognize that there is a relationship between one's activities, attitudes, emotions, and accidents.

19. Analyze the potential influence on the individual of personal drives, desires, and social pressures in participating in risk-taking activities.

20. Express in one's own words the idea that first aid is immediate, temporary help given to the victim of an accident, sudden illness, or disaster until medical help is obtained.

21. Evaluate first aid needs of the injured.

22. Establish safe guidelines for administering first aid.

23. Employ basic first aid techniques in emergency situations.

24. Develop a program of preventive measures which will assist in making one's environment safer.

25. Analyze those situations which necessitate the movement of injured persons from the source of the injury.

26. Determine the appropriate methods of transporting injured persons and necessary precautions.

27. Identify the mobilization procedures for civil disasters.

MAJOR CONCEPTS

1. Increased freedom in play activities requires safety practices.

2. A knowledge of the cause and kind of accidents can help individuals plan for more responsible action.

3. School accident prevention depends on every individual.

4. Many home accidents can be eliminated by the action of individual family members.

5. The individual must assume responsibility for the safety of himself and others.

6. Fire prevention is part of civic and individual responsibility.

7. Knowledge and practice of safety rules in recreational activities helps prevent accidents.

8. A person must know what do do and what not to do and be able to carry it out in time of emergency in order to minimize human suffering and pain.

9. First aid is the immediate and temporary care rendered to a victim of an accident or sudden illness until medical aid can be obtained.

10. A person should know proper components and uses of survival and first aid kits.

11. Through student education, the possibilities for emergencies affecting young people can be reduced.

12. Safety and accident prevention should be a continuous effort.

13. Shunning social pressures may be necessary in avoiding participation in risk-taking activities that break safety rules.

14. The individual should be able to recognize and handle emergencies which occur in everyday living requiring first aid.

15. An appreciation of first aid procedures should be developed to help minimize injuries and save lives.

16. The student should become aware of the responsibilities involved in administering first aid in various emergency and disaster situations.

17. Accidents account for great losses of time, money, and human resources.

18. Certain factors contribute to motor vehicle, home, school, and occupational accidents, but action can be taken to cut down the toll.

19. Highway safety is primarily the responsibility of the individual driver.

20. Most highway accidents are preventable.

21. A responsible person prepares himself for emergencies and diasters.

CONTENT OUTLINE

I. Traffic Safety
   A. Traffic signs
   B. Identifying accident causes
   C. Pedestrian accidents
   D. Safety patrol
   E. Bicycles and motorcycles
   F. Traffic regulations
   G. Seat belts

II. School Bus Safety
   A. Safety regulations for school buses
   B. School bus drills

III. Safety in and Around the Water
   A. Swimming can be fun
   B. Boating and safety regulations

IV. Safety with Fire
   A. Matches and their proper use and storage
   B. Some common liquids that can burn
   C. Community efforts in fire protection
   D. Man-made causes of fires
   E. Proper procedures to follow in case of fire
      1. The fire drill at school and at home
      2. Plans for each specific area of the school and home

V. Home Safety
   A. Falls and their prevention
   B. Burns and scalds and how to avoid them
   C. Poisoning (gas)
   D. Poisoning (solid and liquid)
   E. Electrical problems and emergencies
      1. Safety devices
      2. Signs of trouble
   F. Other miscellaneous home hazards

VI. Outdoor Safety
   A. Winter sports activities
      1. Safe ice skating
      2. Safety on the ski slopes
      3. Sledding and tobogganing
   B. Summer sports
      1. Baseball
      2. Kite flying
      3. Camping and hiking
      4. Nature's hazards
         a. Snakes
         b. Poisonous plants
         c. Thunder and lightning storms
   C. Other recreational activities
      1. Hunting
      2. Fishing

VII. Emergencies Which Affect Young People
- A. Safe behavior and attitudes
- B. Other specific times when safety is important
  - 1. Teenage jobs
    - a. Babysitting
    - b. Agriculture
    - c. Lawn mowing
  - 2. Holiday times
    - a. Fourth of July
    - b. Halloween
    - c. Christmas
  - 3. Responsibility in a nuclear attack

VIII. Emergency Supplies
- A. Survival kit
  - 1. Components
  - 2. Proper uses
  - 3. Provision for carrying at appropriate times
- B. First aid kit
  - 1. Proper components
  - 2. Proper uses

IX. Basic First Aid
- A. Basic principles
  - 1. Sending for help
  - 2. Providing for comfort and safety of victim within limits
- B. Controling of bleeding
  - 1. Types of bleeding
    - a. Nosebleed
    - b. Cuts
    - c. Puncture wounds
  - 2. Methods of control
    - a. Direct pressure
    - b. Application of cold packs
    - c. Pressure points
    - d. Bandaging
    - e. Elevation of affected part
    - f. Treat for shock
- C. Restoring breathing
  - 1. Causes of stopping of breathing
    - a. Asphyxiation
    - b. Drowning
    - c. Electrocution
    - d. Heart attack
    - e. Obstructed airway
  - 2. Artificial respiration
- D. Contusions (bruises) and sprains
  - 1. Application of cold pack
  - 2. Disinfection in case of abrasions
- E. Possible fractures and dislocations
  - 1. Do not move patient unnecessarily
  - 2. Immobilize the part (usually by splinting)

IX. F. Burns
1. Heat induced
a. Cold water
b. Degrees of burns
2. Chemical
a. Wash immediately
b. Acids and bases
c. See doctor as soon as possible
G. Exposure to cold
1. Movement to restore circulation
2. Gradual warming
H. Poison
1. Common causes
a. Drugs
b. Toxic gases
c. Household chemicals
2. Get help immediately
a. Poison Control Center
b. Physician or hospital
3. Look for kind of poison
4. Leave poison sources for medical person's observation
I. Insect bites and stings
1. Wash
2. Disinfect
3. Application of cold
4. Seek medical help if necessary
J. Animal bites
1. Wash and disinfect
2. Get professional help
K. Strains
1. Causes
2. Apply mild heat
L. Know how to contact help
1. Doctor
2. Police, fire or emergency squad
3. Poison Control Center (if near one)

X. Emergency Care of Minor Injuries
A. Blisters
B. Fainting
C. Heat stroke
D. Earache
E. Slivers
F. Convulsions
G. First aid techniques for minor emergencies

XI. First Aid for Natural and Man-Made Catastrophes
- A. Nuclear warfare
  - 1. Medical problems
  - 2. Psychological problems
  - 3. Protective measures
    - a. Immediate
    - b. Long-range
- B. Biological warfare
  - 1. Medical problems
  - 2. Protective measures
- C. Chemical warfare
  - 1. Types
  - 2. Protective measures
- D. Earthquakes
  - 1. Predictions
  - 2. Safety measures
- E. Hurricanes
  - 1. Forecasting
  - 2. Safety measures
- F. Tornadoes
  - 1. From out of nowhere
  - 2. Safety measures
- G. Winter storms
  - 1. Weather forecasting
  - 2. Stocking up
  - 3. Safety measures
- H. Floods
  - 1. Prevention
  - 2. Safety measures

XII. Survival Education
- A. Civil Defense Office
- B. Red Cross

LEARNING AND EVALUATIVE ACTIVITIES

1. Compare current traffic laws with those of the 1920's to see how they've been changed to keep up with modern life.

2. Bring in newspaper accounts of accidents and have discussion period to try and determine causes and prevention.

3. Discuss close calls, and minor accidents happening to students. Note how some minor accidents become major ones and how to prevent them from happening again.

4. Have a member of local police department explain rules and regulations concerning equipment and operation of bicycle.

5. Keep a record of bicycle accidents and how they could have been prevented.

6. Discuss practices which will avoid accidents due to various types of hazards. Make up appropriate slogans and posters for display.

7. Draw up a plan of grounds and buildings, pointing out areas considered unsafe.

8. Organize a "clean-up the playground" period to remove hazardous objects.

9. Discuss and list safety rules for equipment used on your school playground and in sports activities.

10. Collect and discuss news articles on home accidents and ways in which these accidents might have been prevented.

11. Make a card for home use listing telephone number of fire and police departments, ambulance, family doctor, nearest relative, and poison control center.

12. Discuss the following in relation to camping; fire hazards, drinking water, axe and knife safety, hiking, poisonous plants, wild animals, getting lost in woods, keeping and leaving a clean campsite.

13. Participate in the following activities pertaining to boating:
    Make posters of boating laws and regulations. Invite an authorized person in to explain the rules and regulations.
    List dangerous boating areas and conditions in your area.
    Collect newspaper clippings about boating accidents and discuss them.
    Make a model of a boat showing.
    Develop a glossary or vocabulary list of useful boating terms.
    Discuss with an authorized person how a boat should be handled safely, including overloading, standing up, etc.

14. Investigate where swimming lessons are being given in the community, and discuss swimming safety including the following:
    The need for knowing how to swim well.
    Having supervision whenever young people are swimming.
    Safety procedures for diving, using inflated devices, swimming in ocean or surf.
    Demonstrate various non-swimmer rescue techniques.
    Describe buddy system.
    Staying in water too long and swimming after eating.
    Getting a suntan and going barefoot.

15. Anticipate seasonal fire hazards in your locale and list by the season.

16. Study and graph accidents in pupils' homes for 5-6 month period. Compare with graphs for national accidents. Discuss how different locales have different hazards.

17. Show how changes in our way of living bring about new hazards and how old hazards disappear (curling irons, drying hair in oven, being kicked by horse, using ice picks, kerosene lamps, etc.).

18. Have bicycle check to see that bikes are properly identified and parked.

19. Develop a simple check list and conduct survey for hazards in buildings, on grounds, student conduct, etc.

20. Make cartoon drawings depicting safety at home.

21. Prepare an exhibit of hazardous objects or materials found in homes such as metal toys with sharp edges, rugs without rubber backing, oily rags improperly stored, and easily accessible poisonous substances.

22. Participate in fire drills. Discuss ways to improve fire drills. Notice location of fire safety equipment in buildings.

23. Display of recreational equipment such as canoe, gun, skates, sled, skis, bat, fish hook, etc.; select one item and write good safety practices.

24. Put up bulletin board display illustrating safe swimming practices.

25. Make a list or gather examples of as many types of fire extinguishers as you can. Find out the types of fire for which each one is most effective.

26. Discover means of personal protection in case of fire.

27. Gather news clippings about recent fires. Try to determine how they could have been avoided.

28. Collect newspapers clippings about accidents. Discuss first aid procedures that might have been used in each situation.

29. Plan a first aid kit for home, automobile, camping, or hiking.

30. Invite a nurse or physician to speak to class about importance of first aid and basic procedures.

31. Plan a demonstration of the proper method of artificial respiration.

32. Discuss how, by using improper action, additional damage may be done to an injured person.

33. Discuss pupils' camp experiences in relation to first aid in emergencies.

34. Discuss the increased likelihood of accidents due to inclement weather.

35. Invite Civil Defense or Red Cross speaker to discuss your community's readiness for emergencies or visit local Civil Defense shelter.

36. Have a health department representative explain the importance of health during an emergency.

37. Discuss how your school is involved in the community Civil Defense program.

38. Learn the meaning of the various Civil Defense signals and post directions at home and at school.

39. Interview parents and neighbors to find out how well informed the community is on civil defense.

40. First aid is easily integrated into other health units, i.e. first aid for burns can come into a unit including the skin and sunburn; first aid for eye injuries can tie into a unit on sensory organs.

41. Cut up old sheets or other fabric 36" x 36", then cut diagonally to make 2 triangular bandages. A total of about 40 is adequate for a class of 30 children. Demonstrate hand, knee, foot, and head bandages, and arm sling with triangular bandages. Demonstrate splinting with magazines, corrugated cardboard and padded wood strips; use with triangular bandages. Have the pupils practice in groups of two or three.

42. Have the students do a home safety check and list safe and unsafe practices carried out in the home.

43. Discuss the varying human factors which contribute to accidents.

44. Group reports to the class describing safety precautions for their favorite recreational activities.

45. Have the students make safety posters.

46. A great many superstitions are related to safety. Research reports can be prepared dealing with superstitions and safety in which students can try to answer:
    What are superstitions?
    How valid are superstitions?
    Do superstitions really help to protect us against hazards?

47. Have the students divide up in pairs and practice taking a pulse.

48. Set up a work day so that the students can practice various first aid procedures. Designate specific areas in the classroom for applying a pressure bandage, putting on a sling, etc. Have the class rotate to each situation.

49. Have a group of students write and present to class a skit on first aid emergencies.

50. Practice the methods of moving and carrying an injured person.

51. Make your own doll on which to practice rescue breathing. On a quart plastic bottle, punch holes for nostrils and cut out a mouth. Now snap the mouth piece of a balloon over the pouring spout of the bottle. The balloon will act as lungs. Your resusi-doll is now ready to use.

52. Many people are affected by the secretions of certain plants - poison ivy, poison oak, and poison sumac. Prepare a bulletin board display which will help people to protect themselves from contact with these plants.

53. Have the students conduct an "accident hazard survey" in their own homes. They should list the hazard, its source, and devise a preventive measure to eliminate the hazard. The students may conduct a similar "accident hazard survey" within the school and on the school grounds. Using the same format above, they could then report their findings to the building principal and/or the maintenance chief.

54. Invite the driver education instructors to class to speak on the causes of motor vehicle accidents.

55. A similar activity would be to invite the school nurse, coach, and industrial arts instructor to speak to the class on their experiences with accidents relating to the school.

56. Have small class groups devise a safety check list for various activities (operating an outboard motor; a power motor; storing paint materials, etc.). Have this check list put on a mimeo master, duplicated, and made available to people in the community.

57. Have the class make a list of the contents to be found in a good home medicine cabinet. Devise the same for a travel kit. Also, prepare and implement such a kit to be assigned for possible classroom use.

58. Have a student devise a poster which lists the general factors that should be considered before transporting an injured person.

59. Give each student several accident situations and have him select three and relate the first aid procedures to be followed.

Books:

Bicycle Blue Book, The Goodyear Tire and Rubber Company, Akron, Ohio 44316

"Bicycle Drill Team", Instructor, February, 1973; P.O. Box 6099, Duluth, New Mexico 55806

"Bicycle Safety Packet", Bicycle Institute of America, 122 East 42nd Street, New York, New York 10017

"Bicycle Safety Packet", Cycling Activities Department, 1856 North Kostner Avenue, Chicago, Illinois 60639

"Bicycle Safety Packet", Deutsche Verkenhrswacht, Plantanenweg, Bonn/Beuel, West Germany

"Bicycle Safety Packet", National Safety Council, 425 North Michigan Avenue, Chicago, Illinois 60611

Health: A Quality of Life, John Sinacore, MacMillan Company

"Safe Living", A K-6 Scope and Sequence Booklet, Board of Cooperative Educational Services, 125 Jericho Turnpike, Jericho, New York 11753

Safety and First Aid, Jones, Shainberg, Byer; Canfield Press

Tune Into Health, Telice and Carolane, College Entrance Book Company

Films:

A Chance To Save a Life, Boy Scout Office, Central Avenue, Cortland, New York 13035 or Civil Defense Office, Court House, Cortland, New York 13045

And Then It Happened, BOCES #832-229, 18 minutes

Breath of Life, BOCES #832-286, 16 minutes

Can I Help?, (from Inside/Out Series), BOCES (video cassette), 15 minutes

Fire: Not In My House, BOCES #831-363, 11 minutes

Fire: Two Ways Out, BOCES #831-365, 11 minutes

Films: (Con't.)

Healthful Living In Emergencies, Civil Defense Office, Cortland

Honda Safety, (motorcycles), BOCES #832-283, 832-284, 2 reels, 45 minutes

Ice Safety, Boy Scout Office, Central Avenue, Cortland

Life You Save, BOCES #832-318, 17 minutes

Liquids Can Burn, BOCES #832-319, 13 minutes

Mini-Bike, BOCES #833-110, 27 minutes

One Got Fat, BOCES #832-200, 15 minutes

Play Safe, (snowmobiles), BOCES #832-100, 20 minutes

Pulse of Life, BOCES (video cassette), 27 minutes and Civil Defense Office, Cortland

Rescue Squad, BOCES (video cassette), 14 minutes

Safe in the Water, BOCES #832-332, 15 minutes

School Bus Safety With Strings Attached, BOCES #843-25, 28 minutes

To a Babysitter, BOCES #832-338, 14 minutes

Understanding Stresses and Strains, BOCES #831-190, 10 minutes

Water: Friend or Foe, BOCES #833-141, 23 minutes

Poster:

"Instructor Safety Poster", Instructor, April 1973

Pamphlets:

AMA First Aid Manual, BOCES #P-28

Guide for Self-Help and Neighbor Help for the Injured, Civil Defense Office, BOCES #P-31

Rescue Breathing, BOCES #P-23